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A Review of the Current Management of Intracranial Infections of Neurosurgical Importance

Une Revue de la Gestion Actuelle des Infections Intracrâniennes d'Importance Neurochirurgicale

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ABSTRACT

Surgically treated intracranial infections are among the common disease entities seen in neurosurgical practice. Several microbiological agents such as bacteria and fungi have been identified as responsible for intracranial infection. It affects all age groups, though microbial agents and risk factors vary with age. Presentation is non-specific and it requires a high index of suspicion, especially with a background febrile illness such as in the setting of poorly-treated meningitis and immunosuppressive conditions such as retroviral illness. Contrast-enhanced magnetic resonance imaging (MRI) scan is the diagnostic tool of choice; it helps to confirm the diagnosis and exclude other ring-enhancing lesions such as glioblastoma and metastatic brain tumours. Treatment involves medical and/or surgical treatment with clear indications. Surgical treatment includes the drainage of abscess via a twist drill or burrhole craniostomy, and craniotomy for recurrent cases. The advances recorded in the evolution of antibiotics and neuroimaging have helped to improve the outcomes of these patients with intracranial infection. **WAJM 2024; 41 (2): 135 - 147.**

KEYWORDS: intracranial, infection, abscess, antibiotics, surgery

RÉSUMÉ

CONTEXTE: Les infections intracrâniennes traitées chirurgicalement font partie des entités pathologiques courantes rencontrées en pratique neurochirurgicale. Plusieurs agents microbiologiques tels que les bactéries et les champignons ont été identifiés comme responsables des infections intracrâniennes. Cela affecte tous les groupes d'âge, bien que les agents microbiens et les facteurs de risque varient avec l'âge. La présentation est non spécifique et nécessite un haut degré de suspicion, surtout en présence d'une maladie fébrile sous-jacente, comme dans le cas d'une méningite mal traitée et de conditions immunosuppressives telles que l'infection rétrovirale. L'imagerie par résonance magnétique (IRM) avec contraste est l'outil diagnostique de choix ; elle aide à confirmer le diagnostic et à exclure d'autres lésions à rehaussement annulaire telles que le glioblastome et les tumeurs cérébrales métastatiques. Le traitement implique un traitement médical et/ou chirurgical avec des indications claires. Le traitement chirurgical comprend le drainage de l'abcès par une trépanation ou une craniostomie à trou de trepan, et la craniotomie pour les cas récurrents. Les progrès enregistrés dans l'évolution des antibiotiques et de la neuro-imagerie ont contribué à améliorer les résultats de ces patients atteints d'infections intracrâniennes. **WAJM 2024; 41 (2): 135 - 147.**

MOTS-CLÉS: intracrânien, infection, abcès, antibiotiques, chirurgie

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