Multiple Cerebral Aneurysms Caused by HIV-Associated Vasculopathy

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Case Presentation

A 43-year-old Japanese woman who had worked in Kenya, presented with fever, drowsiness and right hemiplegia. Her blood pressure was 100/64 mmHg. Her CD4 count was 12 cells/μL and her HIV viral load was 1,107,818 copies/mL. She was diagnosed as having AIDS. Three-dimensional CT angiography revealed multiple fusiform aneurysms of the first and second branches of the middle cerebral arteries (arrows in Picture 1A) and left vertebral artery (arrowhead in Picture 1A). Blood cultures were repeatedly negative and no infective endocarditis was found on echocardiography. Introduction of HAART was reported to improve the prognosis of a patient with aneurysmal HIV-associated vasculopathy (1). Unfortunately, the present patient had multiple intracranial hemorrhages during her course (Picture 1B and Picture 1C) despite HAART. Previously, 12 adult cases with HIV vasculopathy were reported, including 5 patients with ischemic infarctions, 3 patients with subarachnoid hemorrhages and only 1 patient with intracranial hemorrhages (2). Patients with aneurysmal HIV vasculopathy can develop not only subarachnoid hemorrhages but also multiple hemorrhages in the brain paren-

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