A 68-year-old Japanese man with aphasia and right-sided weakness was admitted to our hospital. Gadolinium-contrast MRI of the brain showed multiple ring-enhancing lesions in the left cerebral hemisphere (arrow in Picture). After admission, he was diagnosed with AIDS, with a CD4 count and viral load of 35/μL and 84,000 copies/mL, respectively. No other remarkable signs of opportunistic infection were identified. Craniotomy was performed to remove the brain lesions, and a direct examination revealed acid-fast bacilli on Ziehl-Neelsen stains. A polymerase chain reaction examination was negative for Mycobacterium tuberculosis and M. avium complex; however, M. kansasii was later identified using DNA-DNA Hybridization (DDH MYCOBACTERIA ‘Kyokuto’). To our knowledge, only three cases of M. kansasii brain abscesses have been previously reported in patients with AIDS (1, 2). Although rare, M. kansasii should be considered a causative pathogen of cerebral mass lesions in patients with AIDS.

The authors state that they have no Conflict of Interest (COI).

References