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A case report on a rare case of basilar impression caused by tuberculous infection

Neha Bista, Collao M and Ghimire P Bicol Medical Center, Philippines

 ${f B}$ asilar impression is a congenital or acquired cranio-cervical junction abnormality where the tip of the odontoid process projects above the foramen magnum, seen as upward displacement of the dens due to softening of the bones at the skull base. The resultant foramen magnum stenosis and compression of the medulla oblongata or spinal cord can cause neurological symptoms, obstructive hydrocephalus, syringomyelia or even death. It may be acquired due to rheumatoid arthritis, Paget's disease, hyperparathyroidism and rickets. To the best of our knowledge, cases of tuberculosis causing basilar impression are regarded rare. This case highlights the importance of ruling in of tuberculosis in endemic areas, especially in young patients with a chronic history of neck pain and features of tuberculosis. A 17 years old female presented with progressively increasing right neck mass with fistula since a year and worsening neck pain since four months. It was associated with restriction of neck movements, low grade fever, anorexia and weight loss followed by gradually progressive right sided hemiparesis since three months before presentation. Neurological examination revealed right sided hemiparesis without cranial nerve palsy. Contrast CT scan of the cranium and cervical spine revealed osteolytic lesions of the C1 and C2 bodies and clivus, vertical displacement

of dens above the foramen magnum with resultant mass effect at the cervicomedullary junction, perivertebral and epidural abscess at C1-C5 with consequent spinal cord compression and cervical lymphadenopathy. There was evidence of basilar impression; the dens appearing 1 cm above the Chamberlain line. A diagnosis of craniovertebral junction for Pott's disease was made. The patient started antitubercular treatment. She showed significant improvement in her neurological deficit during follow-up. As a rare case of craniovertebral junction Pott's disease causing basilar impression, the timely suspicion and subsequent management with antitubercular treatment played a vital role in preventing further morbidity and mortality.

Speaker Biography

Bista N has completed her MBBS at the age of 26 years from Manipal College of Medical Sciences, Kathmandu University, Nepal on Novermber 2015. She is currently pursuing her residency training in radiology at the Bicol Medical Center, Naga City, Philippines. She is to share her interesting cases and looks forward to being actively involved in publication and further enhancing her academics and training.

e: bistaneha@hotmail.com

