Development of a mycotic aneurysm within 4 days

Figure Cranial CT and CT angiography

Initial CT angiography revealed no remarkable abnormalities (A). Four days later, a head CT showed subarachnoidal blood in the basal cisterns (B). A newly formed mycotic aneurysm of the basilar artery was identified by CT angiography (C).

A 60-year-old man with chronic myelomonocytic leukemia was admitted for bacterial meningitis. Initial cranial CT and CT angiography (figure, A) were normal. Four days after admission, the patient became comatose. A subsequent cranial CT (figure, B) revealed a subarachnoid hemorrhage, and CT angiography (figure, C) showed a newly developed aneurysm of the basilar artery. We diagnosed a mycotic aneurysm due to acute meningitis. Apart from endocarditis, meningitis is a frequent cause of mycotic aneurysms.¹ Cases of such rapid aneurysmal development are extremely rare, but should be thought of particularly in immunocompromised patients.²

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