A 70-year-old woman presented with a 2-week history of left hemiparesis. She had no history of fever or of risk factors for opportunistic infections. Physical examination revealed subcutaneous nodules on her fifth digit, left hemiparesis, and dysarthria. Neuroimaging revealed ring-enhancing masses (figure A–D). Brain and skin biopsies revealed mixed infection with Actinobacillus actinomycetemcomitans and Actinomyces israelii (figure E and F). Clinical improvement was observed following intracranial abscess drainage and parenteral penicillin followed by prolonged oral amoxicillin.

CNS actinomycosis is a rare infection which must be identified to ensure appropriate antimicrobial choice.1 A common presentation is cerebral abscess1,2 in immunocompetent patients.2

REFERENCES
Teaching NeuroImages: CNS actinomycosis in an immunocompetent patient
Nandakumar S. Narayanan, Faheem Sheriff and John M. Boyce

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