A 39-year-old woman with recurrent left otitis media presented with the sensation of fluid flowing in the head, headache, mild dyslexia, and disequilibrium for 2 weeks. She reported no head trauma and had a normal neurologic examination. Head CT (figure, A) showed intraventricular pneumocephalus and a focal low-density lesion with air-fluid level in the left posterior temporal region. Brain MRI showed minimal enhancement and no restriction of diffusion, and thus did not suggest an abscess (figure, B). CT of petrous pyramids demonstrated a small bone defect at the left posterior temporal bone, which was considered a possible point of entry for air (figure, C).\(^1\) CSF culture was negative. Lumbar puncture to release intracranial pressure and antibiotic therapy resulted in full recovery without surgical intervention.

**AUTHOR CONTRIBUTIONS**

Dr. Yu: drafting/revising the manuscript, study concept and design, acquisition of data. Dr. Peng: drafting the manuscript, interpretation of data. Dr. Cheng: revising the manuscript, analysis of data. Dr. How: drafting/revising the manuscript, study supervision.

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**REFERENCE**

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