A 52-year-old immunocompetent man presented with a 2-month history of weight loss, fever, and headache associated with cutaneous lesions in his face and upper limbs. A month later, he developed left-sided hemichorea (Video 1). Laboratory investigation revealed a positive serum cryptococcal antigen hemagglutination test. Skin and lung biopsies identified Cryptococcus gattii. Brain MRI showed right caudate and internal capsule T2/FLAIR hyperintense lesions compatible with cryptococcomas (Figure). Cryptococcal infections occasionally present as neurocryptococcosis but rarely as hemichorea, especially in immunocompetent hosts.1,2 After induction therapy with IV amphotericin B plus flucytosine followed by voriconazole, hemichorea (Video 1) and neuroimaging (Figure) improved significantly.

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Appendix
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Appendix (continued)

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