A 30-year-old HIV-positive man with a history of frequent river bathing presented with headache and fever. Neurologic examinations revealed meningeal irritation. On brain MRI, contrast-enhanced T1WI showed diffuse intracranial nodules with high signal intensity, creating a starry sky appearance (Figure A). Serum IgG antibodies against *Schistosoma* species were detected using ELISA. High-throughput sequencing confirmed schistosomiasis in the CSF. These findings and the absence of granulomatous diseases indicated a diagnosis of disseminated cerebral schistosomiasis. The patient was treated with glucocorticoids and praziquantel (60 mg/kg, twice/day for 5 days). One year later, a follow-up MRI showed significant lesion absorption (Figure B).

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