# 62 y/o woman with new seizures.

Biju Gopalakrishnan, MD Leo Wolansky, MD

## MRI T1-Gd Axial & Coronal





# MRI T1-Gd (Sagittal)



## Diffusion-weighted MRI B1000 & ADC







## **Cerebral Abscess**

## MRI T1-Gd





Intense, smooth enhancement is characteristic

## MRI T1-Gd



Intense, smooth enhancement

Fronto-basal location common due to sinonasal entry point of infection



### T1-Gd Non-contrast CT



# CT (right) displays bone remodeling

### T1-Gd Non-contrast CT





CT (right) displays bone remodeling MRI (left) better displays the abnormal cerebral tissue

### **Diffusion-weighted MRI**



B1000 (left) shows marked hyperintensity ADC (right) confirms diffusion restriction typical of pyogenic abscess



#### **Cerebral Abscess**

\* h/o craniofacial trauma > 30 years earlier
\* Treated w/ steroids & broad spectrum antibiotics

## **MRI** Features of Abscess

- Ring enhancement & edema
- Peripheral side of ring is typically thicker due to more vascularity
- Lesion "points" toward ventricle & can rupture into it with rapid clinical deterioration
- Rim can be mildly hyperintense on non-Gd T1
- Purulent contents often isointense on non-Gd T1
- Purulent contents display marked diffusion restriction



## Common causes of Ring enhancing lesions

- Metastasis
- Cerebral abscess
- Primary brain tumor
- Demyelination w/ inflammation
- Tuberculoma
- Toxoplamosis
- Neurocysticercosis
- Subacute lacunar infarct



### **Treatment of Cerebral abscess**

- Medical: Antibiotics Antiedema measures Anticonvulsants
- Neurosurgical: Excision Aspiration



#### References

- Brain abscess current management. Miranda et al; J Neurosci Rural Pract. 2013 Aug; 4(Suppl 1):S67–S81
- Brain abscess . Saez-Llorens X et al; Handb Clin Neurol. 2013;112:1127-34
- Gopalakrishnan B, Wolansky L. Cerebral Abscess. Radiology Online. (2021)