

SUCCESSFUL TREATMENT OF RECURRENT MENINGITIS WITH INTRAVENOUS AND INTRATHECAL VANCOMYCIN

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A 68-Year-old woman visited an emergency room due to the deep stuporous mental status. Purulent and yellowish discharge was revealed with spinal tapping. Relative resistant streptococcus pneumoniae was colonized in the cerebrospinal fluid. When a combined intravenous antibiotic treatment regimen of vancomycin and cefotaxime resulted in no clinical improvement, intrathecal vancomycin was started. Within 3days, clinical and laboratory findings showed significant improvement. After 7 days of intrathecal treatment, blood and CSF cultures were sterile and discharged by walking 1 month later. After 12 months, streptococcus pneumonia meningitis was recurred. Treatment was done with same method by intrathecal vancomycin administration. Encephalo-ethmoidal sinus tract was detected which was made by endoscopic endonasal sinus operation 20 years ago. These results confirm previous reports of the efficacy of intrathecal vancomycin for the treatment of severe infections of the central nervous system caused by multidrug-resistant Gram-positive bacteria.