A Meningitis Mental Tuberculosis and Annihilation of Eye in a 25 years old Sick

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Abstract: History: the inflammatory diseases of nasal membrane which is equivalent with meningeal syndrome is called meningitis.

Tuberculosis meningitis is related with the secondary meningitis group, as an observation in diseases mostly mentioned about lung tuberculosis (PTB) and other organs, which can be pose as primary pose. Tuberculosis meningitis is one of the worst kind of meningitis, which it causes factor is Micro Bacterium tuberculosis (MBT). (CNS) tuberculosis are about to 5% of tuberculosis (Fasi, 2008, p. 40). This kind of tuberculosis in adult can be find from childhood. But in elders also can be find, especially with who have infected HIV, has high mortality.

Tubercula is an uncommon affectation of CNS, which can be seen as one or more space taking lesion and can be cause of incidence of seizure and Incandescent sings.

In CT-scan and MRI cricoid pest can be determine with increasing curtain materials, but for certifying determination Biopsy in necessary, in other words, tubercula is a single impression or multiple circular, and create one Mehraq bigger than one centimeter, among all lung tuberculosis form 6-10% of tuberculosis (Koshkein, 2008, p.73). tuberculosis can be infected primary and secondary in eye, mycobacterium of tuberculosis can infect the persons with the dust which inter to the eyes of the cough of infected person, after spreading of mycobacterium tuberculosis exists.

Meningitis created at the result of diffusion of primary sanguine on in the state of post primary diseases of lungs or in the result of rapture of one subepedymal tubercula in subarachnoid space.

Sick: is one person who live in north of Afghanistan, who complains from headache and vomit, he has examined about one month ago, the meningitis in this sick has been found like meningeal syndrome and lumber punction, the strength of the gen in this sick by Polymerase chain reaction (PCR) for examining was positive, his treatment was start as accepted principles have started with Ant TBs and cortico centroids, in CT-scan, Hydrersphal and basal system has been founded, also cricoid pests are the sign of tuberculosis it is determined that in Funduscopy choroidal tubercle has been founded.

Conclusion: in cases that the sing meningeal syndrome indicates chronic meningitis, it is necessity that we care about the tuberculosis meningitis, it requires to analyze CNS because of syndrome tuberculosis and Annihilation of eye.

1. INTRODUCTION:

Tuberculosis is an infectious and chronic disease, which infected by mycobacterium of tuberculosis, that created in in Moauf tissue on cell mediated hyper sensitivity Granuloma or tubercle among mycobacterium, tuberculosis mycobacterium is the main reasons of tuberculosis in the world, tuberculosis mycobacterium can be cause of central neural system tuberculosis, which is the 5% of the lung extraneous tuberculosis (Horison, 2015, p.1004). which can cause the decreasing temperature, neck rigidity, Lethergia, Hemiplegia, paralysis of neurons, neurotics (Tierney, 2019, p.1488).

The ways of primary determination which the palsy decrease are accurate checkup, the analysis of the sings, gradual start of the disease, medical history, and the existence of the tubercle in that area, radiologic witness, changes of spinal cord (CSG) is also assistance able, culture of CSF is 15-25 is possible to be negative, CSF liquid for the determination of mycobacterium's DNA helpful (Danish, 1390, p. 672).

Sick: a 25 year man who live in north of Afghanistan, before recourse he spent four month with tremor fever, due to high fever he be hospitalized, but not determined, despite of negative his Malaria, treatment for this illness were in progress, after using Malaria medicine he treated a little and exit, however his situation was not satisfaction, as the past he complains from the fever, as he told until one month before hospitalizing again he have fever and headache intermittent, for better determination he hospitalized in other hospital, sonography also did not determined any pathologic sings, in blood checkup, normocytic has been founded, white blood contains and plated were normal, Sed Rate were 35/hour. LFT and urine checkup were normal.

In physical checkup the sing of neck rigidity, Brudzinesky, has been found, and guides for LP CSF, the result are the following:

2. According to Color:

This liquid had yellow color with high pressure (Xonthocrome) and a little dark. The measure of Locksets was (WBS) 160 and lymphocytes have forego (lymphocytes 65%, Neutrophils 35%).

The measure of protein was 70mg/DL and liquid Gloze 35mg/dl and Glucose of blood was 95mg/dl, with the determination of the primary chronic meningitis for the final determination hospitalized, in CSF and VDRL checkup due to pest in cytology checkup all of them was negative, in CSF and TP PCR sample in checkup was positive, in CT-scan checkup small circle pest has been found, which is the sign of tubercles, in MRI also those founding like hydrspholos and uncommon basal system determined, CXR was normal, test of Monto in sick was in 5mm aspects in fuduscopy by eye specialist choroid tubercles have been found.

The sick was hospitalized in combat against tuberculosis for chemotropic, ATT for sick has started it means that the medicine for tuberculosis like R, H, P and E with vitamin B6 with a little Pharmacologic has been taken, for decreasing agonal reaction dexamethasone has been recommended, after two months of starting treatment sick was about to treated, according to this ATT changes sick has been permit, and the follow up determined necessary for completing treatment.

3. Discussion:

Tuberculosis meningitis is one of the reason of thee mycobacterium of Tuberculosis, this is one of the chronic kinds of tuberculosis, and inflammatory the nasal velum with having meningeal syndrome, this disease has high mortality, one of the chronic kind tuberculosis meningitis is intra cranial turberculama (Mindal, 2015, p. 173).

Turberculosis meningitis is the one kind of cryptic meningitis which starts with headache, sub febri and in following neck rigidity, cranial nerve pulsies, Abstractive hydro cephalous and mental changes can be found.

Meningio encephalitis is s meningitis pests and mental brachium this is an emergency medical occurrence, which it looks like a Coma, with the sing of the intracranial pressure, and continued with neurological complications (Danish, 1390, p.672). tuberculosis meningitis is founded at the result of blood diffusion of because of Adjustment of tubercle which causes of sub ependymal in the space of subarachnoid (Harison, 2015, p. 2004). That can be in chronic type.

The common signs of tuberculosis meningitis of are: Coma, continuation of disease mor than five days, increasing lymphocyte in the sample of CSF, the density of liquid glucoses CSF less than 50% of blood glucose at same time, in CT-scan and MRI checkups founding are abnormal. In funduscopy, founding is abnormal and in other organs signs of tuberculosis can be found (Davidson, 2014, p. 303).

The factors which can be the reason of the weak Anzars are the following:

If the age of sick is less than two year or (6-360) month sick has the confusion state, Leticia during hospitalizing, CSF protein become increase more than 70mg/dl, and measure of liquid glucose is less than 20mg/dl (Tierney, 2019, p. 1488).

For determination of meningitis in lumber puncture providing AFB basal 1/3 of occurrence has been seen. In means in primary lumber puncture the chance of positivity is 40% but frequent LP increases the chances to 87%. CSF for finding AFB is possible in 15-25% cases can be negative (Danish, 1390, p.673).

Another indicator the can be beneficial in determination tuberculosis is the appointing the density of ADA, in case that the measure of ADA liquid CSF is higher that 80u/l, the correctness measure of the checkup can be 80-90%, (ADA 43u/ML) if it is too down than this TB denied (Fasi, 2008, p.46).

Liquid PCR (CSF) for determination DNA of mycobacterium is helpful (Danish, 1390, p. 674).

With the PCR checkup we can find 10pg of DNA and 10-1(5CFU) of MTB, totally, the correctness of PCR for CSF is down. But in 60-70% of samples CSF positive PCR has been determined (Mindal, 2015, p.193).

Tuberculosis meningitis in the kind of diseases which can be treatable, in other places without can be infected very less, eye is ocular TB, but at the result of chariot retinitis can cause that the eye loses its vision. Tuberculosis microbe can be cause tuberculosis of uveitis, pan ophthalmatis, conjunctivitis phlyctenular, it is important (Horison, 2015, p.2007).

Management of like this sick is possible with medicines, in tentative or final determination should prevent the interference of surgery.

Eye tuberculosis (ocular TB) in primary form, created by an active fest, and limited to the anatomy of eye. The secondary eye tuberculosis infected by interring microbe in anatomy of eye from the part of annihilation at the result of diffusion of blood from the lungs, or as an Immunologic reaction when the active microbe is not existing, can be create. The primary kind tuberculosis infection is too fast, beside all kind of tuberculosis meningeal syndrome can be infected.

Mental tuberculosis during or after meningitis in case of mass existence in mental the pressure can be exist (Hirold, 1392, p.584).

4. CONCLUSION:

At the result the sick who have Chronic Meningitis, with all the signs from the start they mast care about tuberculosis meningitis, during check-up and analysis of the central neuronal system (CNS) and eye for denying annihilation is necessary.

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