

Abstract

Tuberculosis is a globally prevalent infectious disease that lacks effective control, and it is quite prevalent in Sri Lanka. Among its various forms, central nervous system extrapulmonary tuberculosis stands out as the most severe and lethal manifestation.

The typical symptoms often encompass fever, cough, hemoptysis, weight loss, decreased appetite and headaches, vomiting, changes in consciousness levels particularly when tuberculosis meningitis (TBM) is involved. The main complications associated with TBM comprise cerebral strokes, hydrocephalus, and the formation of tuberculomas.

These neurological complications typically arise during the course of the illness rather than as initial symptoms. However, it's rare for acute ischemic stroke and hydrocephalus to be an initial presentation of tuberculous meningitis.

We document the case of a young male patient who presented with a sudden onset of confusion, unconsciousness, and left-sided weakness. Subsequent evaluation revealed that he had experienced an ischemic stroke and was also diagnosed with hydrocephalus.

His MRI brain showed typical features of TB meningitis, and his cerebrospinal fluid (CSF) report and TB PCR confirmed active tuberculosis despite the absence of typical clinical features of pulmonary tuberculosis. Consequently, we initiated anti-TB treatment and arranged for the insertion of an external ventricular drain (EVD) and a ventriculoperitoneal (VP) shunt. The patient gradually improved, and we scheduled follow-up appointments while continuing the anti-TB treatment for a duration of 12 months. Thus, ischemic stroke, though rare, can serve as a possible but unusual initial presentation of tuberculosis in adults.