

Abstract

Tuberculosis is a granulomatous infection which is caused by mycobacterium tuberculosis that can invade through lymphohematogenous pathway causing disseminated tuberculosis. Despite the availability of effective therapies and investigations, diagnosis of the disease still remains as a challenge due to the non-specific nature of the illness, hence the mortality and morbidity still remain high.

We report a case of a 16- year old immunocompetent male, who presented with a low grade fever with headache, whose tuberculin test, sputum for AFB as well as CSF TB PCR test were negative, but HRCT-chest revealed numerous branching centrilobular nodules in both lungs suggestive of miliary TB and MRI brain features suggestive of tuberculoma of the brain with early hydrocephalus formation.

This case highlights the importance of having high degree of clinical suspicion about the disease and importance of the imaging to aid in diagnosis of the disseminated TB.