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Title: Central nervous system tuberculosis: A 10 year experience of a respiratory department

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Body: Introduction: Central nervous system (CNS) involvement, one of the most devastating clinical manifestations of tuberculosis (TB), is noted in 5 to 10% of extrapulmonary TB cases, and accounts for approximately 1% of all TB cases. Objective: To describe clinical, radiological and laboratory aspects of CNS tuberculosis associated to active pulmonary TB. Patients and methods: A retrospective descriptive study including all patients hospitalized between 2003 and 2012 for pulmonary TB associated with CNS tuberculosis was conducted. Results: There were 12 patients (10 women and 2 men). Mean age was 37 years (17-79 years). Immunodeficiency was noted in 3 patients (diabetes, corticosteroid, AIDS). Five patients had miliary tuberculosis. Suggestive neurologic symptoms were: vomiting (n=5), persistent headache (n=3) and altered sensorium or focal neurological deficit (n=4). The symptoms were present at the time of diagnosis of pulmonary TB in 10 cases. Two patients developed neurological signs after the onset of treatment. Different types of involvement were noted: cerebral tuberculomas (6 cases), tuberculous meningitis (4 cases), spinal tuberculomas (3 cases) and meningoencephalitis (1 case). Mean treatment duration was 16 months (12-36). The outcome was favorable without sequelae in 9 cases and with neurological sequelae in one case. One patient was dead. One patient had a recurrence of tuberculomas 5 years later. Conclusion: Central nervous system TB should be considered in patients with active pulmonary TB presenting with focal neurology or meningeal signs, even when established on treatment.