

CLINICAL IMAGE

CLINICAL IMAGE - 2

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A 47-year-old normotensive, non-diabetic man came with the complaints of high grade fever and productive cough for last 4 days. The patient was diagnosed as a case of Pulmonary Tuberculosis 4 years back. Chest examination from back revealed flattening of left chest, bronchial breath sound on the same side from 4th to 6th intercostal space along with bilateral coarse crepitation. The patient was diagnosed as a case of CAP with post TB fibrosis based on clinical, microbiological and radiological evidences. On 4th day of admission, he became drowsy followed by several episodes of convulsion. His attendants informed that

he had been taking anticonvulsants for last 7 years and stopped those drugs recently. His CBC showed neutrophilic leukocytosis, RBS- 5.5 mmol/L, S. Creatinine- 1.1mg/dl. S. Electrolytes, Calcium, Magnesium, Albumin and Parathormone were within normal limit. CT scan of brain was done-

Questions

Q.1: What are the radiological findings?

Q. 2: What may be the possible diagnosis?

Q.3: What should be the treatment?

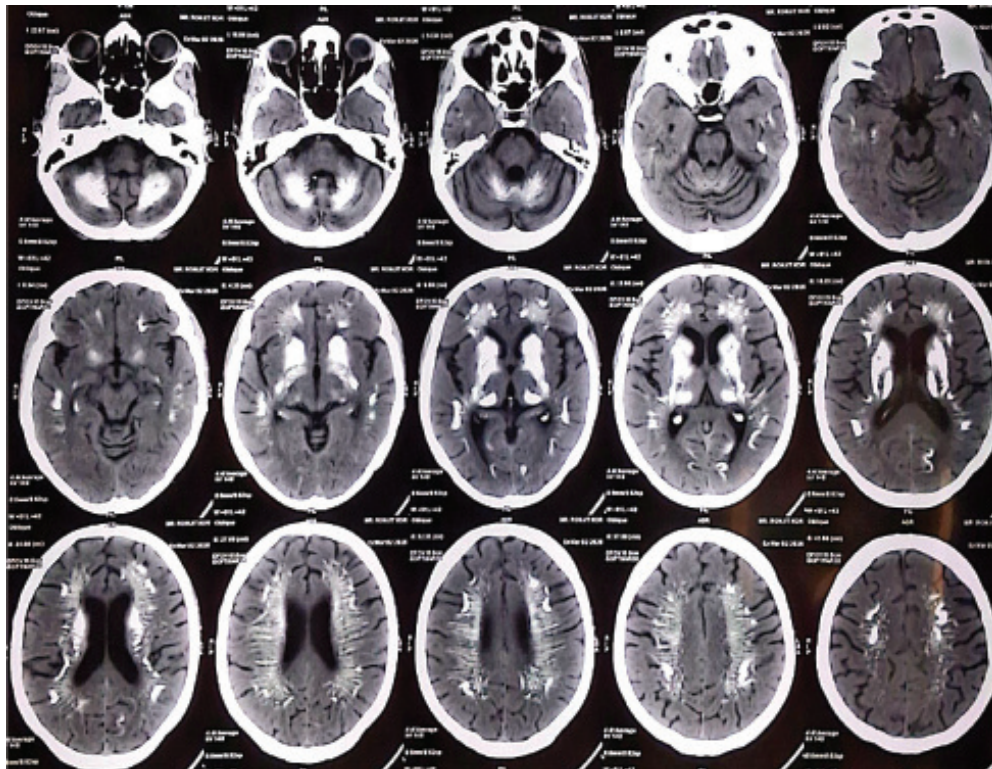


Figure-1: CT scan of brain of a 47-year-old male