

Etiology and sequential changes of C-reactive protein level in patients with intracranial abscesses.

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The serum c-reactive protein level (CRP) is considered an inexpensive laboratory test for monitoring of these patients. Bacteriologically, streptococcus milleri group (38.8 per cent) followed by pseudomonas aeruginosa (16.6 per cent) and staphylococcus aureus (16.6 per cent) were the commonest etiological agents isolated. Rare organism such as actinomyces species (11.0 per cent) and chromobacterium violacium (5.5 per cent) also were isolated. Only one anaerobic organism (bacteriodes fragilis, 5.5 per cent) was detected. The isolation rate of organisms was a high 70.8 per cent with the temporal lobe as the commonest site of the brain involved. Twelve out of twenty four had predisposing factors with congenital heart disease being the commonest (50 per cent). Statistically, minimum CRP was calculated as 12 mgs/L and majority of culture positive (94 per cent) patients had a high CRP value (more than 12 mgs/L). The pre-treatment median CRP value was 48 mgs/L. Abscesses from which gram positive organisms were isolated seemed to have a high CRP value (more than 12 mgs/L). While a good correlation was seen between the CRP level and the size of the abscess, no relationship was established between the CRP level and total white cell count and the erythrocyte sedimentation rate.