## 1997

Fourteen patients with cerebellar abscesses, of a total of 116 brain abscesses treated at our clinic between 1987 and 1992, were analyzed retrospectively. Of 14 cases, 11 were male, and 3 were female. The youngest of the cases was 7, while the oldest was 58, and the average age was 32.4. Five patients were comatose on admission. Mastoiditis in 6 patients, otitis in 3 patients, and pulmonary infection in 1 patient appeared to be the primary foci of infection. In 4 cases no primary infective focus was determined. The periods between the commencement of symptoms and the time of admission to the hospital were as follows: 0-2 weeks in 2 cases, 3-4 weeks in 5 cases, and 4-8 weeks in 7 cases. The primary complaints on admission were headache, unconsciousness and unsteadiness. The most frequent findings were cerebellar ataxia, nystagmus, and unconsciousness. The lesions in patients were established by computerized tomography. Drainage through a single burr hole was performed in all patients. Samples were taken for culture from all of the cases and microorganisms were isolated from 8 but nothing was grown in the 6 patients. The mortality was 21.4% in this series <sup>1</sup>.

## 1975

Forty-seven cases of cerebellar abscess have been reviewed, 93% of which were secondary to otogenic disease. There has been little change in the annual incidence during the period of time under review. The overall mortality was 41%, but with successive decades the mortality has increased. Three factors appear to be of importance in determining survival: the patient's ability to control his infection; reduction of the effect of the posterior fossa mass, preferably by complete excision of the abscess under antibiotic cover; and, in the case of otogenic abscess, an adequate radical mastoidectomy with bone removal to the site of attachment of the abscess to the dura mater <sup>2)</sup>.

## 1948

PENNYBACKER J. Cerebellar abscess; treatment of excision with the aid of antibiotics. J Neurol Neurosurg Psychiatry. 1948 Feb;11(1):1-12. PubMed PMID: 18907038; PubMed Central PMCID: PMC498320<sup>3)</sup>.

1)

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