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Successful Treatment of Angioinvasive Complication of Rhinocerebral Mucormycosis – A Case Study

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ABSTRACT:

Saprophytic fungi cause rhinocerebral mucormycosis, an uncommon but lethal opportunistic infection of the nasal passages, oral cavity, sinuses, and brain. It is most frequent in those with diabetes and those who are immunocompromised. This case report involves a 38-year-old man who had recently been diagnosed with type 2 diabetes mellitus and complained of headaches, cough, numbness and tingling in his face, jaw discomfort, and diplopia for many days. Despite a differential diagnosis of tubercular meningitis, rhinocerebral mucormycosis was established by radio imaging methods and histopathological examination (HPE). Even though he had acquired carotid artery blockage, suggesting an angioinvasive infection, the patient fully recovered after taking an amphotericin B infusion for 20 doses. The current report emphasizes the significance of having a high index of suspicion when managing patients with diabetes presenting with facial pain, headache or cough and prompt inception of clinical management to control rhinocerebral mucormycosis.

KEYWORDS- rhinocerebral mucormycosis, angioinvasive nature, carotid artery occlusion, amphotericin-B

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