

## **Otogenic Brain Abscess Management**

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**Objective:** To present our experience with the management of Otogenic Brain Abscess and compare it with the current concept of treatment.

**Setting:** ENT Department, King Fahd Hospital of the University.

**Method:** Over five years (1998-2003) six patients with otogenic brain abscess were admitted in ENT and Neurosurgery ward for management. Patients were thoroughly investigated, treated with antimicrobial drugs and surgical evacuation.

**Results:** Main complaints were: severe headache, vomiting, somnolence, imbalance and deafness. Main findings were bilateral or unilateral tympanic membrane perforation, foul smelly discharge, granulation tissue, retraction pocket, hearing loss, nystagmus, and hemipareses. Four had temporal lobe abscess, one cerebellar and one parietal. Their abscesses were evacuated through transcranial (4) or transmastoid (2) approach.

**Conclusion:** Otogenic brain abscess is still common complication of chronic ear disease. Radical mastoidectomy (RM) with transmastoid drainage in addition to the proper antimicrobial is the first line of treatment before attempting craniotomy or burr hole for evacuation.