A 60-year-old man with chronic myelomonocytic leukemia was admitted for bacterial meningitis. Initial cranial CT and CT angiography (figure, A) were normal. Four days after admission, the patient became comatose. A subsequent cranial CT (figure, B) revealed a subarachnoid hemorrhage, and CT angiography (figure, C) showed a newly developed aneurysm of the basilar artery. We diagnosed a mycotic aneurysm due to acute meningitis. Apart from endocarditis, meningitis is a frequent cause of mycotic aneurysms.1 Cases of such rapid aneurysmal development are extremely rare, but should be thought of particularly in immunocompromised patients.2

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Disclosure: The authors report no disclosures.

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Development of a mycotic aneurysm within 4 days
*Neurology* 2008;71;1745
DOI 10.1212/01.wnl.0000335247.86599.6f

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