A 40 year old woman presented with a headache that she had for two years. There was no history of trauma, chronic illness, or exposure to tuberculosis. General and systemic examination revealed no abnormality; she had no neurological deficits. There were no scalp swellings or sinuses.

The skull radiograph showed three rounded osteolytic lesions in the right frontal, right parietal, and left frontal regions, with regular punched out borders and no surrounding sclerosis (fig 1). Computed tomography of the brain revealed a corresponding destructive lesion of the skull with the involvement of the inner table more than the outer table. There was neither subgaleal nor extradural abnormal enhancing soft tissue near the lesions. There were no parenchymal lesions in the brain.

QUESTIONS

1. What is the differential diagnosis and what other investigations are indicated?
2. What are the different forms of calvarial tuberculosis and what is the common presentation?
3. What is the management of this condition and indication for surgery?


Figure 1  Plain radiograph (lateral view) of the skull showing well circumscribed lytic lesions in the right frontal, right parietal, and left frontal regions.