A Case of a Neonate with Severe Congenital Toxoplasmosis

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Abstract: A 3,372-gram male neonate was delivered transvaginally at 38 weeks and 5days of gestation. He was referred to our hospital for further examination 7 days after birth because a lateral ventricular dilatation was detected on ultrasonography at 33 weeks' gestation. A *Toxoplasma gondii*-specific IgM antibody was positive in his peripheral blood. Computed tomography showed hydrocephalus with intracranial calcification. Our diagnosis was congenital toxoplasmosis. Oral administration of pyrimethamine, sulfadoxine, and folic acid started when the patient was 16 days old. Ventriculo-peritoneal shunting was performed at 27 days of age and the boy was 42 days of age with no complications. This treatment continued until he was 1 year old. At that age he was also diagnosed with chorioretinal atrophy. Except for this, his physical and mental development are now (at age 3) normal.

Key words: ***Toxoplasma gondii*, TORCH syndrome, Inapparent infection, Screening, Pyrimethamine-sulfadoxine**