

Images

Dural based tumor causing cognitive decline: Question

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1. Clinical background

A 73-year old woman, previously well, presented with 3 months history of rapidly progressive cognitive deterioration, behavioral changes and memory disturbances noted by her family. No fever, weight loss, visual changes or other systemic symptoms were associated. Her past medical history was only significant for hypertension and hyperlipidemia. Physical exam was normal, with a Glasgow Coma Scale of 14 (E4V4M6) with disorientation to time. Blood test were unremarkable. The initial CT scan show a frontal parasagittal enhancing tumor. (Fig. 1A-B) A subsequently MRI (Fig. 1C-F) showed two space occupying lesions, both enhancing after administration of gadolinium; a parasagittal bifrontal 7.3 cm × 5.1 cm × 4.6 cm tumor, with surrounding brain edema

and middle line shift to the left of 1.1 cm and a second lesion left parietal parasagittal 1.7 cm × 1.4 cm × 1.4 cm mass.

2. The most likely diagnosis is:

- Dural-based metastatic carcinoma
- Multiple parasagittal meningiomas
- Primary dural based lymphomas
- Solitary fibrous tumors
- Intracranial Hodgkin's disease
- Plasmocytoma

Answer on page: 493

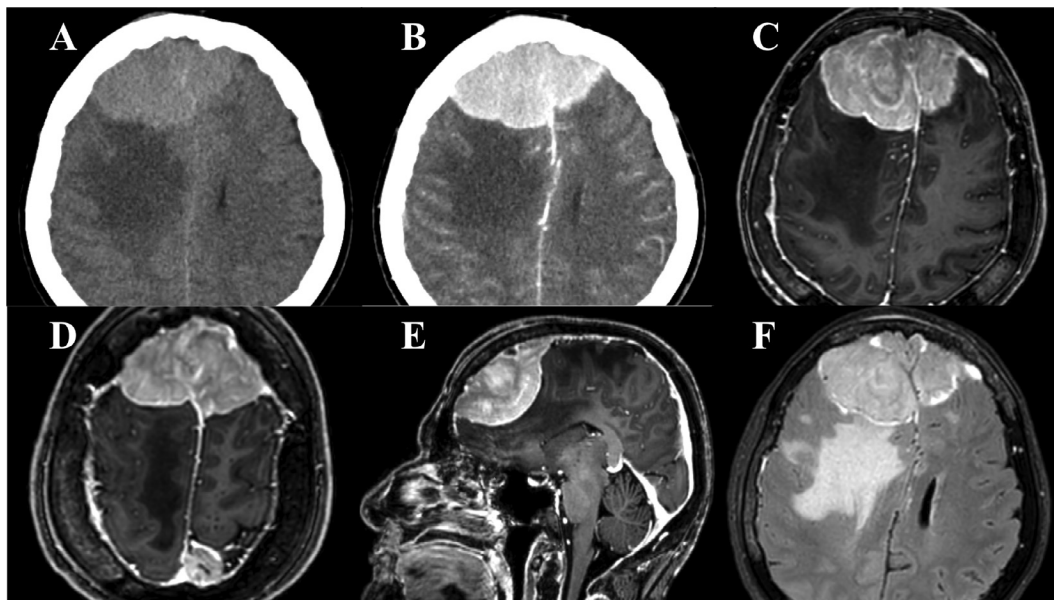


Fig. 1. Preoperative (A) non-contrast and (B) contrast head CT, (C,D) axial (E), sagittal T1-weighted gadolinium-enhanced and (F) fluid-attenuated inversion recovery (FLAIR) MRI showing multiple homogeneously-enhancing parasagittal lesions in a 73-year-old woman with significant peritumoral edema.

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