

which have high morbidity and often require expert surgical treatment. Pre-operative differential diagnosis, relies heavily on imaging data, such as location (intradural versus extradural) and signal characteristics (before and after intravenous contrast media); which must be interpreted attending to the patient's age, gender and clinical presentation.

OBJECTIVE

To perform a review of all intradural tumours observed between 1997 and 2008. To collect and contrast imaging features with histopathological results of all cases.

METHOD

We conducted a retrospective analysis, collecting data from clinical, radiological and histopathological records of patients with intradural tumours treated in a twelve-year period, from 1997 to 2008.

RESULTS

62 case files were recovered, of which 44 (70,9%) belonged to female patients. The average age at presentation was 54,3 years (SD± 14,4 years). We report imaging findings in 12 schwannomas, 14 meningiomas, 1 neurofibroma, 6 ependymomas, 2 myxopapillary ependymomas, 6 astrocytomas, 2 hemangioblastomas, 1 ganglioglioma, 1 leiomyoma, and 1 metastasis of a systemic tumour.

CONCLUSION

With the exception of a single extremely rare tumour, the overall composition our series is comparable to what has been reported in similar reviews. The significant volume of data advanced on the appearance of these lesions illustrates the diverse features which may be present on imaging and their usefulness for diagnostic purposes. As expected, MRI was found to be of paramount importance in all cases, providing the largest contribution. Surprising or otherwise unexpected diagnosis are presented and discussed individually.

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Brachial neuritis caused by Varicella-Zoster diagnosed by changes in brachial plexus on MRI

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Brachial neuritis is a rare disorder affecting the brachial plexus. It is characterized by the acute onset of shoulder and arm pain followed by weakness, sensory loss and atrophy. Diagnosis is essentially clinical with electrophysiological investigations and imaging useful in excluding other differentials and supporting the diagnosis. Magnetic resonance imaging (MRI) usually does not show any pathology in the brachial plexus or spinal cord. We present a case of a patient who had brachial neuritis preceded by varicella zoster infection. This was supported by MRI which showed abnormal signal consistent with inflammatory changes in the brachial plexus—to our knowledge a first in the literature.

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MRI AND PATHOLOGY FINDINGS IN ACUTE SPINAL CORD COMPRESSION DUE TO EPIDURAL LIPOMATOSIS COMPLICATED BY AN ABSCESS

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PURPOSE

Spinal epidural abscess (SEA) is a rare condition associated with high morbidity and mortality if untreated. SEA is characterized by a collection of pus within the epidural space, between the dura mater and the adjacent fatty tissue. The reported incidence of SEA has been increasing over the last few decades probably as a result of the worldwide diffusion of better spinal imaging procedures. The purpose of our study was to describe the MRI and pathology findings in a case of acute spinal cord compression due to epidural lipomatosis complicated by an abscess.

METHODS

Multiplanar and multiecho MR imaging of the total spine was performed emphasizing the relative T1 and T2 and T1 fat saturation signal characteristics. Clinical data of the patient and pathology findings were obtained.

RESULTS

A 68 year-old male without recognized risk factors for infection or spinal epidural lipomatosis presented with rapidly progressive paraplegia of the lower limbs. MR images of the thoracic spine were interpreted as being consistent with an abscess within an epidural lipomatosis compressing the spinal cord. Laminectomy was performed, and a large amount of pus was drained from the epidural lipomatosis, from which *Staphylococcus Aureus* was isolated. This is the first reported case of an abscess involving an epidural lipomatosis.

CONCLUSION

This case is peculiar because: 1) our patient had no known risk factors for spinal infection, 2) there were no classical predisposing factors for spinal lipomatosis and 3) lipoma is usually not prone to become infected. This is the first reported case of an abscess involving an epidural lipomatosis.

Inflammatory, Demyelinating and Degenerative Diseases of the Brain

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APPARENT DIFFUSION COEFFICIENT VALUES CHANGES IN BRAIN ABSCESES DURING TREATMENT

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PURPOSE

To describe the post-treatment changes in brain abscesses signal intensity on diffusion-weighted imaging (DWI), by measuring the apparent diffusion coefficient (ADC) during successful treatment.