Teaching NeuroImages: Idiopathic hypertrophic spinal pachymeningitis mimicking epidural lymphoma

Hui-Ting Hsu, MD
Shu-Shong Hsu, MD
Chu-Chun Chien, MD
Ping-Hong Lai, MD

Correspondence to
Dr. Lai:
pinghonglai@gmail.com

Figure 1 Spine MRI

Spinal MRI reveals a circumferential long epidural mass (arrows), extending from T2 to T4 level, encompassing spinal cord with low signal intensity on T1-weighted image (A) and T2-weighted image (B) and marked homogeneous enhancement on fat-suppressed postcontrast T1-weighted images (C, D).

A 41-year-old man presented with bilateral leg numbness and paraparesis for 3 months. MRI showed a circumferential long epidural mass extending from T2 to T4 level (figure 1). Histologic examination demonstrated dense fibrous tissue with inflammatory infiltrate (figure 2). By exclusion of trauma, infectious diseases, and autoimmune diseases, idiopathic hypertrophic spinal pachymeningitis (IHSP) was diagnosed.

IHSP is a rare inflammatory disease characterized by hypertrophic inflammation of the dura mater. The typical MRI finding of IHSP is a long epidural mass of low T2 signal intensity with peripheral

enhancement.¹ Homogeneous enhancement is typical of and could be mistaken for epidural lymphoma.²

AUTHOR CONTRIBUTIONS

Dr. Hui-Ting Hsu: concept, drafting, and revision of article. Dr. Shu-Shong Hsu: clinical examination of the patient. Dr. Chu-Chun Chien: interpretation of photomicrograph of pathologic specimen. Dr. Ping Hong Lai: concept, drafting, and revision of article.

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From the Departments of Radiology (H.-T.H., P.-H.L.), Neurosurgery (S.-S.H.), and Pathology (C.-C.C.), Kaohsiung Veterans General Hospital; and the School of Medicine (P.-H.L.), National Yang-Ming University, Taipei, Taiwan.

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Photomicrograph of excised specimen shows dense fibrosis (asterisks) with fibroblast proliferation (arrowheads) and lymphoplasmacytic inflammation (arrows) (hematoxylin & eosin, original magnification $\times 400$).

DISCLOSURE

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