A 37-year-old man presented with progressive gait ataxia for 2 weeks. He also complained of right neck tumefaction and general malaise for 1 month. His prior medical history included hypertension, depression, polysubstance abuse, and 1 year of mild short-term memory complaints. His Mini-Mental State Examination score was 26/30; he had mild left hemiparesis, and ataxia of the limbs, trunk, and gait. CSF examination showed protein 78 mg/dL, glucose 52 mg/dL, nucleated cell count 42 (87% lymphocytes, 13% monocytes); cytology, JC virus, and varicella zoster virus PCR were negative. Brain MRI, neck PET, and right cervical lymph node and frontal stereotactic brain biopsy (figures 1 and 2) were consistent with granulomatous angiitis of the CNS associated with Hodgkin lymphoma.1,2

AUTHOR CONTRIBUTIONS
Dr. Fuehrer: drafting/revising the manuscript, contribution of vital reagents/tools/patients, acquisition of data. Dr. Hammack: drafting/revising the manuscript, study supervision. Dr. Morris: drafting/revising the manuscript, analysis or interpretation of data. Dr. Kaufmann: drafting/revising the manuscript, analysis or interpretation of data. Dr. Giannini: drafting/revising the manuscript, study supervision.

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revising the manuscript, study concept or design, acquisition of data, study supervision.

DISCLOSURE
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Teaching NeuroImages: Granulomatous angiitis of the CNS associated with Hodgkin lymphoma
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