Teaching NeuroImages: Diagnostic utility of FDG-PET in neurolymphomatosis

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A 70-year-old woman with a history of non-Hodgkin lymphoma presented with left-sided facial pain. MRI of the face, orbit, and neck was negative (figure). A week later, she developed hypesthesia in a V3 distribution. Repeat MRI was again non-diagnostic but fluorodeoxyglucose (FDG)-PET showed increased uptake along the left V3 branch of the trigeminal nerve in both axial (B) and coronal (C) cuts, consistent with perineural spread of disease. Axial (E) and coronal (F) cuts showed increased FDG activity in the left parotid gland.

Neurolymphomatosis is a rare manifestation of hematologic disease and diagnosis is often delayed.1 Our case illustrates the utility of FDG-PET in establishing the diagnosis of neurolymphomatosis when suspicion is high but MRI is unrevealing.2

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The authors report no disclosures relevant to the manuscript. Go to Neurology.org for full disclosures.

REFERENCES

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