Teaching NeuroImages: Meningioangiomatosis

Figure 1  CT and MRI of bifrontal parasagittal lesion noncontrast axial CT

(A) Amorphous high density indicative of mineralization with corresponding subtle low signal on susceptibility MRI (B). (C) Precontrast T1 shows isointense but thickened cortex. (D) Postcontrast T1 shows robust leptomeningeal enhancement, presumably due to vascular proliferation, and subtle nonspecific cortical enhancement. Subcortical white matter signal changes, characteristic of meningioangiomatosis, were initially difficult to appreciate (E) but were more apparent on follow up T2-fluid-attenuated inversion recovery image (F).

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A 23-month-old full-term boy presented with tonic-clonic seizures. Lumbar puncture and routine laboratory tests were unremarkable. CT (figure 1A) showed bifrontal parasagittal calcification. Brain MRI revealed corresponding signal abnormalities with gradient susceptibility (figure 1D) and enhancement (figure 1F). Differential diagnoses included prior infection, vascular malformation, and tumor. Biopsy (figure 2) was consistent with meningioangiomatosis.

Meningioangiomatosis is a rare epileptogenic lesion involving the meninges and cortex characterized by vascular proliferation and calcifications. Meningioangiomatosis occurs sporadically or in association with neurofibromatosis 2 (NF2).\(^1\),\(^2\) Testing for NF2 proved positive in this patient, despite no other clinical stigmata.

**AUTHOR CONTRIBUTIONS**

Jessie Aw-Zoretic: drafting/revising the manuscript, analysis or interpretation of data, accepts responsibility for conduct of research and final approval, acquisition of data, image processing. Delilah Burrowes: study concept or design, accepts responsibility for conduct of research and final approval, study supervision. Nitin Wadhwani: drafting/revising the manuscript, analysis or interpretation of data, accepts responsibility for conduct of research and final approval, acquisition of data. Maura Ryan: drafting/revising the manuscript, study concept or design, accepts responsibility for conduct of research and final approval.

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**REFERENCES**


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