A 46-year-old previously healthy woman presented with recurring left frontal and occipital headache. A brain MRI demonstrated diffuse dural thickening (figure 1, top). CSF analysis showed no abnormalities. A meningeal biopsy had pathology typical of an amyloid tumor (figure 2). Further investigations did not reveal evidence of plasma-cell tumor, multiple myeloma, systemic amyloidosis, underlying inflammatory disorder, or malignancy. Follow-up brain MRIs revealed regression of the pachymeningeal disease after treatment with corticosteroids and brain irradiation.

Amyloidosis is a group of diseases characterized by the extracellular deposition of amyloid protein. Extra-axial locations are rare, but dural amyloidoma should be considered in the differential diagnosis of diffuse meningeal thickening despite the absence of systemic amyloidosis.
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**Author contributions:** Dr. Shibao: study concept, revision of the manuscript. Dr. Dalprá: clinical and radiologic data, patient consent, revision of the manuscript. Dr. Andrade: study design, drafting and revision of the manuscript. Dr. Leite: revision of the manuscript, study supervision.

**Study funding:** No targeted funding reported.

**Disclosure:** S. Shibao and F. Dalprá report no disclosures relevant to the manuscript. C. Andrade is a recipient of a postdoctoral grant from FAPESP (São Paulo Research Foundation, grant 2012/00398-1). C. Leite is supported by CNPq (National Council for Scientific and Technological Development, grant 308267/008-7). Go to Neurology.org for full disclosures.

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Dural amyloidoma: An unusual presentation of CNS amyloidosis

Neurology 2016;86;1266-1267
DOI 10.1212/WNL.000000000002520

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