Teaching NeuroImages: Skull and dural lesions in neurosyphilis

A 42-year-old man who was HIV negative presented with supraclavicular lymphadenopathy, headache, and soft tissue enlargement in the right temporal region. MRI showed a periosteum enlargement associated with dural thickening (figure, A and B). A venereal disease research laboratory test was 1/1,024, with an increased CSF protein level and cell count. The patient received benzylpenicillin and exhibited complete remission of the lesions (figure, C and D). Although atypical, bone disease in secondary syphilis may occur, especially in the skull. It is usually described as subcutaneous lesions, edema in the adjacent bone medullary, and dural thickening. For patients with this imaging pattern, syphilis should be included in the differential diagnosis.1,2

AUTHOR CONTRIBUTIONS
Marcos Rosa Júnior: design or conceptualization of the study, analysis or interpretation of the data, drafting or revising the manuscript for intellectual content. Thalita de Almeida Caçador: analysis or interpretation of the data. Claudia Biasutti: analysis or interpretation of the data. Augusto Meneghelli Galvão Gonçalves: analysis or interpretation of the data.
Carlos Urbano Gonçalves Ferreira Júnior: drafting or revising the manuscript for intellectual content.

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REFERENCES
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