Spinal hemangioblastoma arising from cervical nerve root

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A 39-year-old woman presented with neck and shoulder pain for 3 months. The MRI scan revealed a cystic-solid lesion located at C5 (figure 1, A–E). The patient received an operation and a small blood blister–like soft mass was detected. The tumor originated from proximal cervical nerve root and compressed the spinal medulla (figure 2, A–C). Pathologic diagnosis was hemangioblastoma (figure 2D). Postoperative gadolinium-enhanced MRI showed a gross total resection of the tumor (figure 1F). Spinal hemangioblastomas frequently originate from the medulla,1 and nerve root originated hemangioblastoma is scarce. Our case provides a direct-viewing description and pathologic confirmation of a new subset of classification for origin of spinal hemangioblastomas.

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Figure 2 Operative and pathologic findings

During operation, a soft blood blister–like mass was detected (A). After carefully dissecting it, we found that the lesion arose from the proximal cervical nerve root (arrow), compressing the spinal medulla (asterisks) (B). The tumor was totally resected so that the nerve root (arrow) and spinal medulla (asterisks) were revealed (C). Hematoxylin & eosin (magnification, ×200) (D) showed large intratumoral vascular channels, loose stromal elements, and prominent capillaries characteristic of a hemangioblastoma; the nerve root tissue (asterisks) is surrounded by tumor stroma.

Appendix Authors

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<tr>
<th>Name</th>
<th>Location</th>
<th>Contribution</th>
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<tbody>
<tr>
<td>Jiuhong Li</td>
<td>Chengdu, Sichuan, China</td>
<td>Study design, data collection and analysis, drafting the manuscript, analysis and interpretation of data</td>
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Appendix (continued)

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Reference

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