A 47-year-old healthy man presented with intermittent low back pain radiating to the left calf; within 1 month, the pain worsened at night and disturbed his sleep. Examination showed paresthesia in left lateral calf, weakness in left ankle plantarflexion, and decreased ankle reflex. Neuroimaging revealed near-total obliteration of the spinal canal by a 2 × 1.2 cm nodule (asterisk) with ring enhancement (arrow) at L5-S1 level compressing the thecal sac. Axial T1-weighted nonenhanced (C) and enhanced (D) MRI at L5-S1 level show near-total obliteration of the spinal canal by the nodule (asterisks).

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Disclosure

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

Figure 2 Intraoperative and Pathologic Findings of the Ruptured Disc

(A) Intraoperative photograph reveals a nodule (asterisk) locating between the S1 and S2 rootlets and displacing both rootlets. DS = dural sac. (B) Pathology reveals fibrous tissue with colonization of chondrocytes (arrow) and infiltration of inflammatory cells (magnification), compatible with degenerated intervertebral disc.

Appendix

Appendix Authors

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<thead>
<tr>
<th>Name</th>
<th>Location</th>
<th>Contribution</th>
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</thead>
<tbody>
<tr>
<td>Chia-En Wong, MD, BS</td>
<td>National Cheng Kung University Hospital, College of Medicine, National Cheng Kung University, Tainan, Taiwan</td>
<td>Designed and conceptualized study, analyzed and interpreted the data, drafted the manuscript</td>
</tr>
<tr>
<td>Po-Hsuan Lee, MD</td>
<td>National Cheng Kung University Hospital, College of Medicine, National Cheng Kung University, Tainan, Taiwan</td>
<td>Analyzed and interpreted the data, revised the manuscript</td>
</tr>
<tr>
<td>Chi-Chen Huang, MD</td>
<td>National Cheng Kung University Hospital, College of Medicine, National Cheng Kung University, Tainan, Taiwan</td>
<td>Analyzed and interpreted the data, revised the manuscript</td>
</tr>
<tr>
<td>Hui-Wen Chen, MD</td>
<td>National Cheng Kung University Hospital, College of Medicine, National Cheng Kung University, Tainan, Taiwan</td>
<td>Analyzed and interpreted the data, revised the manuscript</td>
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<tr>
<td>Chih-Hao Tien, MD</td>
<td>National Cheng Kung University Hospital, College of Medicine, National Cheng Kung University, Tainan, Taiwan</td>
<td>Analyzed and interpreted the data, revised the manuscript</td>
</tr>
<tr>
<td>Chih-Yuan Huang, MD, PhD</td>
<td>National Cheng Kung University Hospital, College of Medicine, National Cheng Kung University, Tainan, Taiwan</td>
<td>Analyzed and interpreted the data, revised the manuscript</td>
</tr>
<tr>
<td>Jung-Shun Lee, MD, MSc</td>
<td>National Cheng Kung University Hospital, College of Medicine, National Cheng Kung University, Tainan, Taiwan</td>
<td>Designed and conceptualized study, analyzed and interpreted the data, revised the manuscript, supervised the study, final approval</td>
</tr>
</tbody>
</table>

References

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