A 36-year-old woman presented with a 2-year history of unsteady walking. Examination showed hoarse voice and weakness of the left shoulder. CT revealed thickening of the left occipital and temporal bones (Figure 1), which was thought to be fibrous dysplasia. Brain MRI demonstrated a giant posterior fossa lesion and cervical syringomyelia (Figure 2). The lesion was noted to involve dura mater. Subtotal resection was performed. Pathology confirmed the diagnosis of en plaque meningioma (WHO grade I). Cell proliferation index Ki-67 was 2%. En plaque meningioma is a thinner and more invasive variant of classical meningioma. This case demonstrates the potential for syringomyelia to occur as a complication of meningioma.
meningioma is a rare subtype of meningioma characterized by “sheet-like” patterns of growth. Signiﬁcant hyperostosis is often observed.

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### Appendix Authors

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### Reference

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