A 24-year-old man presented with a 6-month history of weakness of the right lower limb, without upper extremity weakness. Spinal cord CT/MRI showed an extensive intramedullary lesion from C7 to T4, with classical radiologic features of lipoma (Figure). There was no spinal dysraphism. Subtotal resection of the lesion was performed. The pathology confirmed the diagnosis of lipoma. Postoperatively, the patient’s motor function temporarily deteriorated. The symptoms improved after 2-month rehabilitation. Nondysraphic spinal intramedullary lipomas are extremely rare, constituting approximately <1% of all intraspinal tumors. MRI is the most sensitive imaging protocol; typical radiologic appearances can confirm diagnosis and avoid biopsy.

Acknowledgment
We all express our gratitude to the patient, who kindly gave consent for publishing this paper.

Study Funding
No targeted funding reported.

Disclosure
The authors report no relevant disclosures. Go to Neurology.org/N for full disclosures.
Publication History
Received by Neurology March 5, 2022. Accepted in final form July 11, 2022. Submitted and externally peer reviewed. The handling editor was Roy Strowd III, MD, Med, MS.

Appendix Authors

<table>
<thead>
<tr>
<th>Name</th>
<th>Location</th>
<th>Contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Haijuan Lv, MD</td>
<td>Department of Radiology, The Second Affiliated Hospital of Jiaxing University</td>
<td>Drafting/revision of the manuscript for content, including medical writing for content; Major role in the acquisition of data</td>
</tr>
<tr>
<td>Hongwei Zhao, MD</td>
<td>Department of Radiology, The Second Affiliated Hospital of Jiaxing University</td>
<td>Drafting/revision of the manuscript for content, including medical writing for content; Study concept or design</td>
</tr>
</tbody>
</table>

References

Appendix (continued)

<table>
<thead>
<tr>
<th>Name</th>
<th>Location</th>
<th>Contribution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cai Yu, MD</td>
<td>Department of Diagnostic and Interventional Radiology, University of Texas Health Science Center at Houston</td>
<td>Drafting/revision of the manuscript for content, including medical writing for content; Additional contributions: Improved the writings.</td>
</tr>
</tbody>
</table>

Visit the Neurology® Website at Neurology.org/N
- More article-based content on home pages
- Streamlined menus and navigation
- Enhanced blog sections for specialty areas
- Same experience on desktop, tablet, and mobile devices
- Improved article reading experience; links more evident (pdf, analytics, social media)
- Find Neurology® on Facebook: http://tinyurl.com/neurologyfan
- Follow Neurology® on Twitter: https://twitter.com/GreenJournal

Disputes & Debates: Rapid Online Correspondence
The editors encourage comments on recent articles through Disputes & Debates:
Access an article at Neurology.org/N and click on “MAKE COMMENT” beneath the article header.
Before submitting a comment to Disputes & Debates, remember the following:
- Disputes & Debates is restricted to comments about articles published in Neurology within 6 months of issue date, but the editors will consider a longer time period for submission if they consider the letter a significant addition to the literature
- Read previously posted comments; redundant comments will not be posted
- Your submission must be 200 words or less and have a maximum of 5 references; the first reference must be the article on which you are commenting
- You can include a maximum of 5 authors (including yourself)
Teaching NeuroImage: Lower Limb Muscle Weakness Due to Intramedullary Spinal Cord Lipoma
Haijuan Lv, Hongwei Zhao and Yu Cai
Neurology 2022;99;724-725 Published Online before print August 26, 2022
DOI 10.1212/WNL.0000000000201167

This information is current as of August 26, 2022

Updated Information & Services
including high resolution figures, can be found at:
http://n.neurology.org/content/99/16/724.full

References
This article cites 2 articles, 0 of which you can access for free at:
http://n.neurology.org/content/99/16/724.full#ref-list-1

Subspecialty Collections
This article, along with others on similar topics, appears in the following collection(s):
CT
http://n.neurology.org/cgi/collection/ct
MRI
http://n.neurology.org/cgi/collection/mri
Spinal cord tumor
http://n.neurology.org/cgi/collection/spinal_cord_tumor

Permissions & Licensing
Information about reproducing this article in parts (figures, tables) or in its entirety can be found online at:
http://www.neurology.org/about/about_the_journal#permissions

Reprints
Information about ordering reprints can be found online:
http://n.neurology.org/subscribers/advertise