A 6-year-old boy, with an unremarkable birth history and developmental history notable only for intellectual disability, developed expressive aphasia and intermittent vomiting in 3 weeks. Brain MRI showed communicating hydrocephalus and characteristic diffuse subpial cystic lesions throughout the surface (Figure). His symptom of vomiting was relieved after he was given a ventricular-peritoneal shunt (valve pressure set as 140 mm H2O) and meningeal-cortical biopsy. The final diagnosis was diffuse leptomeningeal glioneuronal tumor, a new entity in the 2016 WHO classification of CNS tumors. He was referred to a local oncology center because chemotherapy had been proposed as first-line treatment.

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The Editor of the Neurology specialty section Inclusion, Diversity, Equity, Anti-racism, & Social Justice (IDEAS) encourages you to submit short first-person accounts (1,000 words or less) of experiences lived within the realm of IDEAS with the goal of informing and enlightening our community on these critical issues. Some topics to consider include, but are not limited to:

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Teaching NeuroImage: A Rare Pediatric Case of Diffuse Leptomeningeal Glioneuronal Tumor
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