Teaching Video NeuroImage: Waddling-steppage gait secondary to spinal arachnoid cyst

An exceptional surgical outcome

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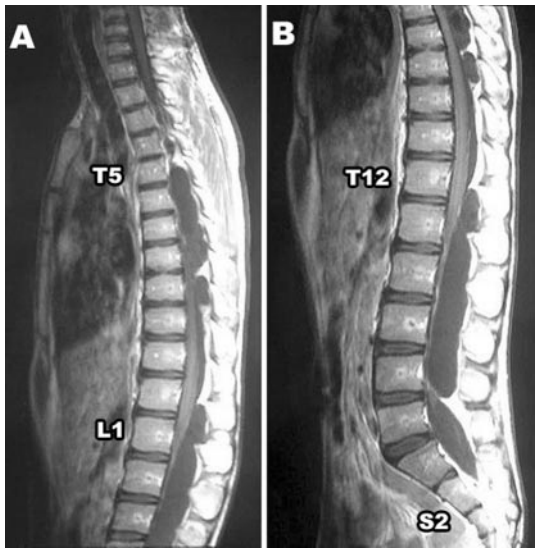
Forty-five days after a substantial physical effort, a 14-year-old boy developed low back pain and severe waddling-steppage gait (video 1). Deep tendon reflexes were abolished in the lower limbs and plantar responses inapparent. A spinal MRI depicted a cyst extending from T5 to S2 (figure). A complete thoracic cyst resection (video 2) and a lumbar cyst peritoneal shunt were performed. The pathologic specimen examination was conclusive for arachnoid cyst. After 4 months, the gait was normal (video 3). Speculatively, the physical effort accentuated a ball valve phenomenon[1] in a preexisting asymptomatic idiopathic arachnoid cyst.

Figure Sagital T1-weighted gadolinium MRI of the thoracic (A) and lumbosacral (B) spinal cord showing a large, multilobulated posterior subarachnoid cyst extending from T5 to S2 and displacing the spine anteriorly



REFERENCE

1. Sharma A, Sayal P, Badhe P, Pandey A, Diyora B, Ingale H. Spinal intramedullary arachnoid cyst. Ind J Pediatr 2004;71:e65–e67.

Supplemental data at www.neurology.org

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