Teaching NeuroImage: Primary cerebral amyloidoma mimicking CNS neoplasm

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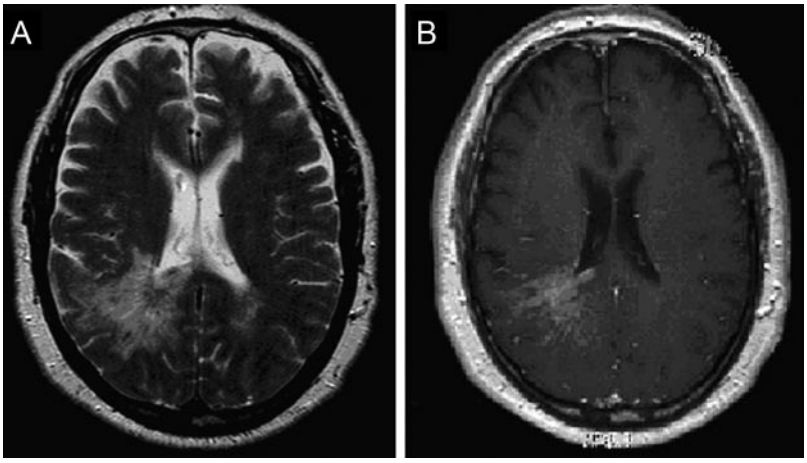
Figure (A) T2-weighted MRI; (B) postgadolinium T1-weighted MRI



A 63-year-old man presented with a single generalized tonic-clonic seizure. Neurologic examination demonstrated left hemisensory extinction and partial left homonymous hemianopsia. MRI demonstrated a heterogeneous enhancing hyperintense lesion in the right parietal white matter extending into the splenium (figure). CSF analysis revealed normal cytology, elevated IgG index, and oligoclonal bands. Tissue obtained via stereotactic biopsy stained positively with Congo red and was consistent with cerebral amyloidoma. No evidence of systemic amyloid disease was found. Primary cerebral amyloidomas are a rare form of focal extracellular amyloid deposition which can mimic infiltrating tumors. The clinical course is typically nonprogressive.[1]

REFERENCE

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