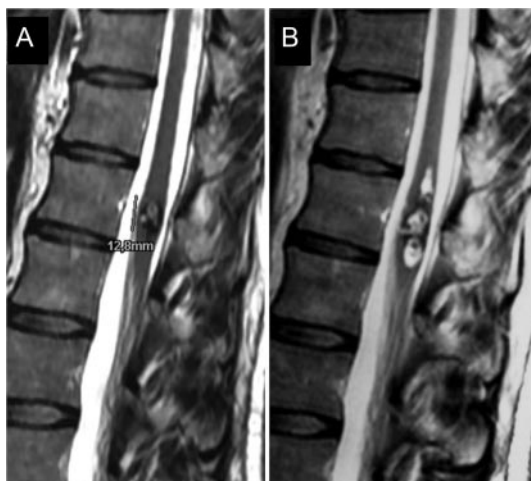


# Teaching NeuroImages: ExtraleSIONal bleeding of conus medullaris cavernoma

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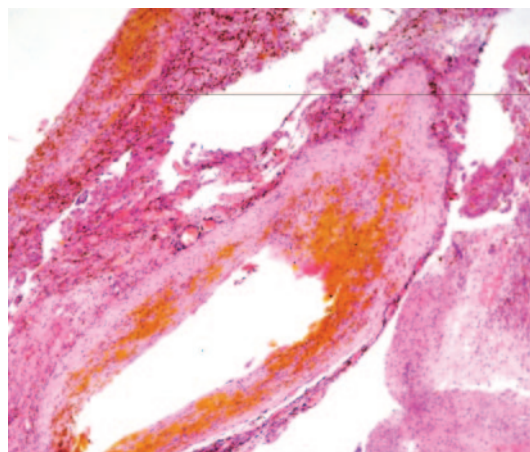
Figure 1 Spinal MRI



Sagittal T2-weighted image showing the conus medullaris cavernoma at time of diagnosis (A); 3 months later (B), extraleSIONal bleeding was evident.

A 42-year-old man with a 9-month history of right leg paresthesias was admitted because of the acute onset of numbness and weakness of the left leg with gait impairment. Neurologic examination demonstrated bilateral lower limb hyporeflexia. MRI showed acute extraleSIONal bleeding of a conus medullaris cavernoma, which had been discovered 3 months before (figure 1, A and B). Surgical removal was performed (figure 2). At 3 months follow-up, the patient had mild lower limb paresthesias; leg weakness had resolved.

Figure 2 Histopathology



Hematoxylin & eosin staining (magnification  $\times 100$ ) showing a large vessel and irregular tissue spaces with cystically enlarged lumina and thin walls filled with hemosiderin pigment, typical features of cavernous hemangioma.

The conus medullaris is a rare location for a cavernous hemangioma.<sup>1</sup> Surgery may be performed in cases with acute, symptomatic hemorrhage, although the benefits remain uncertain.<sup>1,2</sup>

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