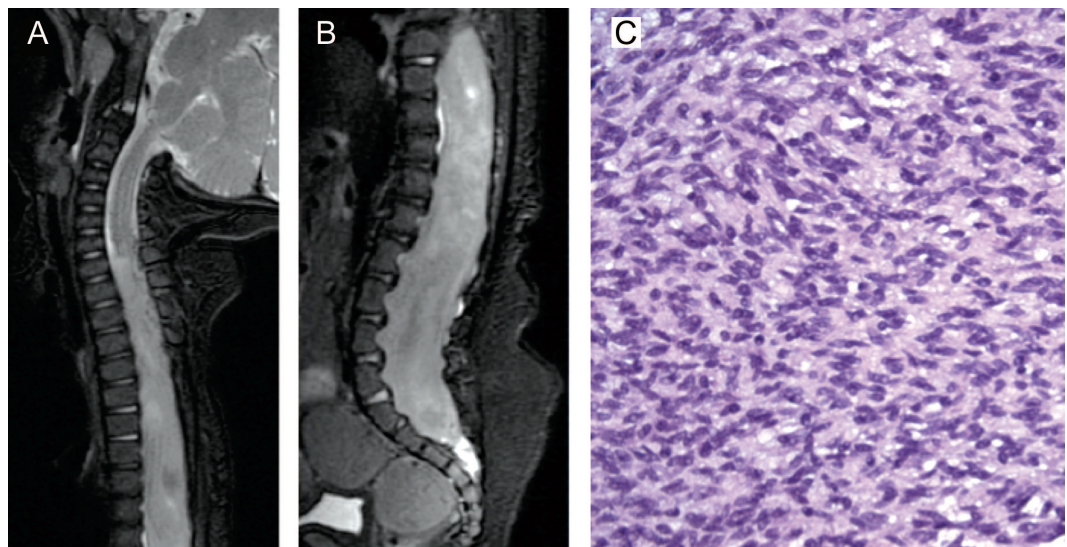


Congenital giant intramedullary spinal cord schwannoma

Figure Congenital schwannoma: MRI and histology



Sagittal T2-weighted spine MRI (A, B) demonstrates an intramedullary mass from T2 to the distal spinal column with extension through the neural foramina and scalloping along the lumbar vertebral bodies. Pathology revealed a benign spindle cell neoplasm with palisading of bland, vesicular nuclei consistent with a cellular schwannoma (C, 400 \times magnification).

A full-term infant with an uncomplicated vaginal delivery presented with absent cry on routine newborn heelstick testing. Neurologic examination revealed paraplegia, absent reflexes, and a T4 sensory level. Spinal MRI showed an expansive, gadolinium-enhancing intramedullary mass from T2 to the thecal sac (figure, A and B). Biopsy confirmed a diagnosis of cellular schwannoma, WHO grade 1 (figure, C). Genetic and immunohistochemical testing for NF-2 and schwannomatosis were negative. Cases of focal intramedullary schwannoma have been rarely reported.^{1,2} This congenital, extensive intramedullary schwannoma highlights the diversity of low-grade neonatal spinal neoplasms, obviating initiation of therapy until pathologic diagnosis is achieved.

C.A. Lyle, MD, D. Malicki, MD, PhD, M.O. Senac, MD, M.L. Levy, MD, PhD, J.R. Crawford, MD, MS,
San Diego, CA

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Address correspondence and reprint requests to Dr. Courtney Lyle, Department of Pediatrics, Division of Hematology-Oncology, University of California, San Diego, Rady Children's Hospital, 3020 Children's Way MC 5035, San Diego, CA 92123; calyle@rchsd.org

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