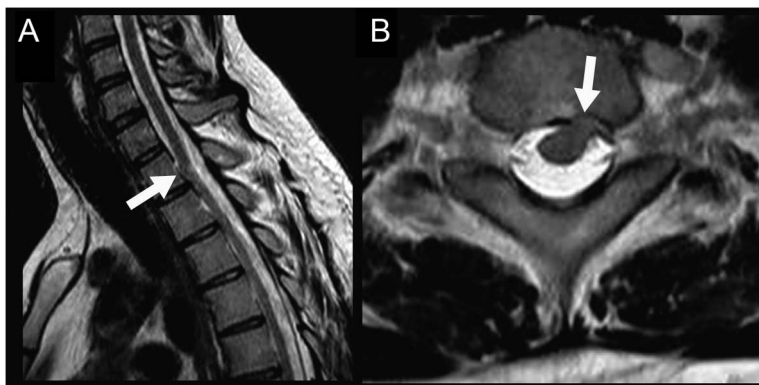


Spontaneous transdural spinal cord herniation

Figure T2-weighted MRI



(A) Sagittal T2-weighted MRI: ventral displacement of the spinal cord. (B) Axial T2-weighted MRI: herniation of the ventral spinal cord to the left.

A 42-year-old man with a history of benign incidental dorsal trauma 5 years earlier presented with progressive weakness of the right leg for 2 years. Clinical examination revealed decreased left-sided pain, temperature, and light touch sensation below the level of T2, right leg weakness, normal proprioception, and increased deep tendon reflexes in the right leg, in absence of bladder dysfunction. Spinal MRI showed herniation of the ventral spinal cord to the left at level T1 (figure). A diagnosis of transdural spinal cord herniation (TSCH) was made. TSCH is a rare cause of progressive myelopathy. TSCH is reported after spinal trauma or herniated disc surgery.¹ Spontaneous cases are also described.² Patients usually present with a Brown-Séquard–like syndrome or progressive paraparesis.

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