NEUROIMAGES

Mastoid osteoma with stenosis of transverse and sigmoid sinuses as a cause of pseudotumor cerebri

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Neurology® 2019;93:37-38. doi:10.1212/WNL.0000000000007727

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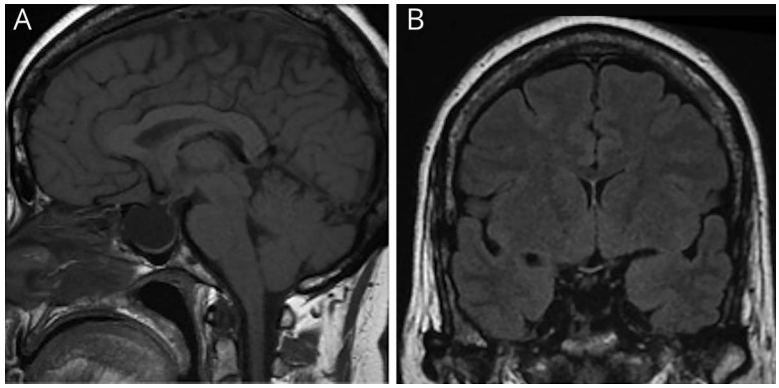
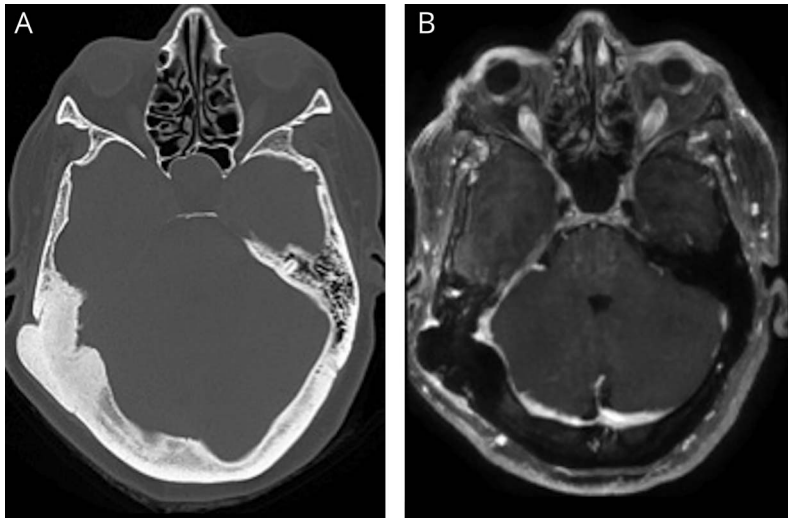
Figure 1 Neuroimaging



(A) Partial empty sella with bone remodeling. (B) Atrophic and degenerated bilateral optic nerve and chiasm.

Figure 2 Expansive mastoid lesion



(A) Large right temporal bone osteoma involving the sigmoid sulcus. Enlarged sella turcica is also visible. (B) Displacement and stenosis of right transverse sinus. Also note hypoplastic left transverse sinus.

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A 54-year-old woman with progressive visual loss and signs of hyperprolactinemia underwent neuroimaging that shows partial empty sella (figure 1A), atrophic bilateral optic nerve (figure 1B), and expansive mastoid lesion (figure 2), causing stenosis of the right transverse and sigmoid sinuses (figure 2B). CSF analysis was normal, except for high opening pressure (41 cm H_2O). The clinical and radiologic findings are diagnostic of pseudotumor cerebri, also known as idiopathic intracranial hypertension. This disorder is usually related to stenosis of unknown cause of the larger lateral sinuses, which are commonly asymmetric.[1] Rarely an anatomic lesion can be determined by neuroimaging.[2]

Study funding

No targeted funding reported.

Disclosure

The authors report no disclosures relevant to the manuscript. Go to Neurology.org/N for full disclosures.

Appendix Authors

Name	Location	Role	Contribution
Gustavo Lima Guarneri	Hospital de Clínicas, Paraná	Author	Research, wrote the manuscript
Bernardo Corrêa de Almeida Teixeira	Hospital de Clínicas, Paraná	Author	Research, revised the manuscript for intellectual content

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