

# Cavernous lymphangioma

Cavernous lymphangioma is a rare slow growing tumor that can cause neurologic compromise when it involves the central nervous system. Involvement of the spinal column is rare but may involve the osseous structures or the epidural space of the spinal column.

Kerolus et al report the first case of an intradural, extramedullary cavernous lymphangioma involving the thoracic spinal cord.

An eighty-three year old female presented with progressive gait ataxia, bilateral lower extremity weakness and a band-like sensation in the middle and lower thoracic dermatomes. Magnetic resonance imaging of the thoracic spinal cord revealed hyperintensity on T2 and enhancement of an intradural cystic mass along the dorsal aspect of the T5-8 levels with significant compression of the spinal cord.

Complete surgical resection was difficult due to the adherence of the tumor to the pial surface and microvasculature of the thoracic spinal cord. Recurrence of the mass was ultimately treated with cystic fluid diversion into the peritoneum. At her twenty-eight month follow-up visit, the patient was able to ambulate with minimal assistance. A comparative literature review is presented. There are no reports in the literature of intradural thoracic spinal cord involvement.

Intradural cavernous lymphangioma of the spine poses a unique surgical challenge for complete resection. Cystic fluid diversion appears to be a viable treatment option with lasting benefit if complete resection is not achieved <sup>1)</sup>

<sup>1)</sup>

Kerolus MG, Patil J, Kurian A, Sani S. Intradural cavernous lymphangioma of the thoracic spine: case report, technical considerations, and review of the literature. Spine J. 2016 Mar 9. pii: S1529-9430(16)00457-5. doi: 10.1016/j.spinee.2016.03.012. [Epub ahead of print] PubMed PMID: 26970599.

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