

Cerebellopontine angle tumor

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Classification

see [Cerebellopontine angle lesion classification](#)

Case report

Q11731

The 62-year-old woman, a former smoker for 2 years, has a history of two cesarean sections, underwent polypectomy by hysteroscopy, and had a curettage procedure. She also has a medical history of Type 2 Diabetes Mellitus, hypothyroidism, hypertension (HTA), and dyslipidemia (DLP).

Right-sided [sudden hearing loss](#).



Space-occupying lesion in the right [cerebellopontine angle](#), extending to the ipsilateral [internal auditory canal](#), measuring approximately 22 x 24 mm in maximum diameters on the axial plane (oblique axes) and 17 mm in the long axis. The lesion diffusely enhances with intravenous [contrast](#), presenting a [dural tail](#) towards the anterior region, consistent with [cerebellopontine angle meningioma](#) vs. [vestibular schwannoma](#). It produces a discreet impression on the adjacent cerebellar parenchyma without edema. The anterosuperior edge of the lesion is immediately adjacent to the cisternal course of the right V cranial nerve, without clear compression.

The acoustico-facial bundle and cistern of the left cerebellopontine angle are without alterations. The [fourth ventricle](#) and cerebellar tonsils are normal. No signal changes are observed in the brainstem or cerebellum.

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