Abbas et al. report a rare case of an extensive intracranial calcification of a VP shunt. This is a very rare case of a documented extensive calcification around the ventricular catheter of a VP shunt [1].

James et al. describe 3 children who presented with progressively enlarging skin-covered solid masses over the shunt catheter in the neck/clavicular region. The authors reviewed the clinical, laboratory, pathological, radiographic, and follow-up data for all 3 patients and reviewed the literature on the subject. The patients had no clinical evidence of an infectious process. Surgical exploration revealed that masses were surrounding and encasing the shunt tubing to which they were strongly attached. Pathological studies of the tissues demonstrated varying degrees of exuberant chronically inflamed granulation tissues, interstitial fibrosis, and dystrophic calcification. One patient had associated thinning of the skin overlying the mass and subsequently developed ulceration. No infectious organisms were observed. The cerebrospinal fluid aspirates from the shunts did not yield any organisms. There has been no recurrence of the masses. The presence of a growing mass over the shunt tube in the neck or the chest region without clinical evidence of infection does not indicate that the mass should be treated with antibiotics and complete shunt removal. Rather, the mass can be cured by extirpation and with “bypass” new shunt tubing locally [2].

1)
Abbas M, Bakhaidar M, Baeesa SS. Intracranial Dystrophic Calcification of Ventriculoperitoneal Shunt: A Case Report. Pediatr Neurosurg. 2018 Aug 17:1-4. doi: 10.1159/000491822. [Epub ahead of print] PubMed PMID: 30121661.
2)
James HE, Postlethwait RA, Sandler ED. Solid noninfectious growing masses over cerebrospinal fluid shunts: report of 3 cases. J Neurosurg Pediatr. 2015 Jan 30:1-4. [Epub ahead of print] PubMed PMID: 25634820.