

Spinal cystic tumor

An MRI has been considered as the best tool to investigate the spinal cystic tumor. Generally, [schwannoma](#)s appears as hypointensity on T1-weighted MR images and heterogenous intensity on T2-weighted MR images, based on the different components within the schwannoma ¹⁾.

The hypointensity on T2-weighted MR images often correspond to hemorrhage, dense cellularity or collagen deposition, whereas hyperintensity may represent cystic changes ²⁾.

The radiological differential diagnosis of spinal cystic tumor includes a cystic neurinoma, ependymoma, neurenteric cyst, epidermoid, bronchogenic cyst, cystic teratoma, [Tarlov cyst](#), and arachnoid cyst ^{3) 4)}

A contrast study is preferred to differentiate schwannoma from other neoplasms. Rim enhancement of an intradural extramedullary tumor on MRI should be considered as the diagnosis of schwannoma.

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Jaiswal A, Shetty AP, Rajasekaran S. Giant cystic intradural schwannoma in the lumbosacral region: a case report. *J Orthop Surg (Hong Kong)* 2008; 16: 102-106.

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Kasliwal MK, Kale SS, Sharma BS, Suri V. Totally cystic intradural extramedullary schwannoma. *Turk Neurosurg* 2008; 18: 404-406.

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Shiono T, Yoshikawa K, Iwasaki N. Huge lumbar spinal cystic neurinomas with unusual MR findings. *AJNR Am J Neuroradiol* 1995; 16 (4 Suppl): 881-882.

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