

46TH ANNUAL DIAGNOSTIC SLIDE SESSION 2005
CASE 2005-5

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Clinical and Surgical History: An 8-year-old girl was first seen at our institution in the summer of 2004 for evaluation of progressive scoliosis. Her mother and school nurse noted mild trunk asymmetry beginning at age 6 as well as progressive enuresis. Recently she developed prominent daytime urinary urgency and frontal headaches, progressively increasing in frequency and severity. Her past medical/surgical history was remarkable for prematurity with a birth weight of 1 pound and 13 ounces. She required an extended neonatal ICU stay, apparently without sequelae. On physical examination her left leg length was 1 cm shorter than the right. She showed a 1.5 cm left thoracolumbar prominence on forward bending. The neurologic exam was negative. Imaging of the thoraco-lumbar spine demonstrated an extradural mass within the left side of the spinal canal involving T11 to L3. The mass extended through remodeled left neural foramina at multiple levels into adjacent psoas muscle. Spinal cord was not compressed.



CT

MRI (T2)

Radiologically, the mass was thought to be to a nerve sheath tumor, most likely a plexiform neurofibroma. MRI of the head was normal.

Debulking of the tumor was undertaken in two separate stages with posterior and anterior approaches.

Material submitted: Representative H&E section of the resected tumor.

Points for discussion:

1. Diagnosis
2. Rationale for classification