

Clinical data: S/P meningioma resection

MRI EXAMINATION OF THE BRAIN WITH CONTRAST

Multiplanar and multisequence imaging of the brain was performed including diffusion tensor imaging and post contrast scans following administration of 20ml prohance-gadoteridol

FINDINGS

There is evidence of operative changes in the right scalp with areas of altered signal intensity in the right fronto-temporal region showing CSF isointense signal and peripheral FLAIR hyperintensity consistent with gliosis and encephalomalacia. There is some ex-vacuo dilatation of the lateral ventricle particularly the right frontal horn. There is no obvious enhancing residual or recurrent mass.

On tractography, there is destruction of the right frontal-temporal white matter radiation along with hint of wallerian degeneration in the right crus cerebri/tegmentum.

The rest of the brain is normal in size and configuration. Normal midline structures are apparent. Normal flow void is noted in the internal carotid and basilar arteries. Otherwise, ventricular system, basal cisterns, subarachnoid spaces, and sylvian fissures are within normal limits. Fourth ventricle and cerebral aqueduct appear normal.

Normal gray/white matter differentiation is noted. On the T2-weighted imaging, no abnormal resonant signal is noted. The cerebellum appears normal in size and position. There is no evidence of tonsillar ectopia. Brainstem appears unremarkable. The craniocervical junction appears intact.

The region of the CP angle cisterns and sella turcica appear normal with no evidence of tumor. Seventh and eighth nerve bundles are well visualized and appear normal. There is no evidence of suprasellar abnormality. The visualized paranasal sinuses, orbits, and retro-orbital contents appear normal.

IMPRESSION

1. OPERATIVE CHANGES IN THE RIGHT SCALP WITH AREAS OF ALTERED SIGNAL INTENSITY IN THE RIGHT FRONTO-TEMPORAL REGION CONSISTENT WITH GLIOSIS AND ENCEPHALOMALACIA WITH EX-VACUO DILATATION OF THE LATERAL VENTRICLE PARTICULARLY THE RIGHT FRONTAL HORN.
2. THERE IS NO OBVIOUS ENHANCING RESIDUAL OR RECURRENT MASS.
3. ON TRACTOGRAPHY, THERE IS DESTRUCTION OF THE RIGHT FRONTAL-TEMPORAL WHITE MATTER RADIATION ALONG WITH WALLERIAN DEGENERATION IN THE RIGHT CRUS CEREBRI/TEGMENTUM.

