

Nom du patient: BASSIL VANESSA PAUL  
Date de l'examen: 09/Nov/16  
ID: J03-048735  
Médecin traitant: MATTAR HANNA

## **MRI Brain**

**Clinical Information:** Patient with history of epilepsy.

**Technique:** Using a high field 1.5T magnet and the brain coil, multiples echo sequences of the brain were obtained. Sagittal and axial T1 weighted, axial, and coronal T2 weighted, axial flair, diffusion weighted, T2, and FFE T2-weighted images were obtained. Post contrast axial, sagittal and coronal T1 weighted images were obtained.

### **Findings:**

Images of the brain demonstrate a 29 x 47 mm mass seen in the right parasagittal parietal lobe/parietal convexity, demonstrating a cystic and a soft tissue components, in close contact with the superior sagittal sinus at its posterior curvature, demonstrating on the post infused images significant enhancement of its soft tissue component, which demonstrate also central small millimetric cystic changes in the center.

This lesion demonstrates a significant tumoral infiltration/engulfing the superior sagittal sinus which is enhancing on the post infused images, however no identified thrombus seen within the sinus.

There is a mild vasogenic peritumoral edema, in the underlying white matter of the parietal lobe, extending to the level of the parieto-occipital junction.

There is no significant midline shift seen.

The ventricles and cortical sulci demonstrate satisfactory appearance.

There is no evident abnormal enhancement otherwise seen within the brain parenchyma dura or leptomeninges at the infra or supratentorial level.

### **Impression:**

Right parasagittal parietal/parafalcine extraaxial mass of mixed soft and cystic tissue component demonstrating avid enhancement on the post infused images and invading the superior sagittal sinus with a mild to moderate peritumoral edema of the underlying white matter; Constellation of findings is highly suggestive of a parasagittal/parafalcine meningioma with a cystic component and invasion of the sinus. However, other intraaxial tumors cannot be completely ruled out though less likely.

## **MR Venogram**

### **Findings:**

MR venogram obtained at the level of the brain demonstrate occlusion of the superior sagittal sinus at the tumoral infiltration level, as above described, with multiple intra and extracranial collateralities seen at this level with transosseous venous nesting.

The anterior aspect of the superior sagittal sinus and the posterior aspect of the superior sagittal sinus and the confluence are still patent, however small in size.

Signé électroniquement par: Dr Raghid Kikano