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### EP-0319 [Spine and Peripheral Nerve » Spinal Tumors] Lumbar Spinal Epidural Angiolipoma Mimicking a Discal Herniation

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Spinal angiolipomas are fairly infrequent benign tumours that are usually located in the epidural space of the thoracic column and represent 0.14% to 1.3% of all spinal tumours. Lumbar angiolipomas are extremely rare, representing only 9.6% of all spinal extradural angiolipomas. The present report describes a rare case of a lumbar epidural angiolipoma, in a 38 year-old woman presenting with a 5 days history of paralytic sciatalgia. The clinical examination, found an obesity, and a neurological deficit of the right leg. Th lumbar CT, showed a typical image of a discal herniation at the L4-L5 level. Per operative, we are astonished not to find a discal herniation, but a fibrous sticky yellowish hypervascular tumor in the anterior epidural space, encompassing the dural sheath, and fusing into the foramina of L5. Histological study revealed the tumor as an angiolipoma. Symptoms were relieved after tumor excision, with immediate recovery of the deficit. After one month, there were no sequelae. Although extremely rare, lumbar epidural angiolipoma should be considered in the differential diagnosis of lumbar spinal epidural lesions. MRI is essential for diagnosis. The prognosis after surgical management of this lesion is favorable.

**Keywords:** Lumbar angiolipoma, Paralytic sciatalgia, Spine tumor

### EP-0320 [Spine and Peripheral Nerve » Spinal Tumors] Giant Thoracic Neurinoma in Arena Watch

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Also called Schwannomas are benign tumors, slow growth, derived from Schwann cells, represent 30% primary spinal neoplasms. 70% intradural, extradural 15% pure, 14% intra and extradural at a time (hourglass), 1% intramedullary pure. Male 57 years old, Edo Mexico, non-chronic degenerative, non-toxicomanias. Refers to start 2 years ago with sensation of (numbness and tingling) in the left costal region. 1 year ½ prior to admission symptoms progress, Flashing. 6 months ago - pain on contact with clothing. 1 month - lower left extremity weakness. EF. Decreased sensitivity in dermatomes T9 T10 left side, Patellar reflexes and Aquileo (+) left. MRI Contrast is observed intra and extradural tumor as well as intra-thoracic left-root dependent T9, which enhances the contrast medium with pedicle and vertebral body erosion of T9 and extension both T8 and T10. Left posterolateral approach, thoracotomy and resection of the tumor in three portions: thoracic, epidural and intradural. Report of pathology reports compact pattern with Antoni type A cells and VEROCAY bodies. Giant thoracic Schwannoma. With adequate evolution by external consultation, screening was completed

by genetic test for neurofibromatosis type 2, negative for it. The teaching objectives of this presentation are to inform about the management and treatment of this rare pathology in our population and to determine standards of treatment and follow-up of these patients by means of screening test for neurofibromatosis type 2 and follow-up with magnetic resonance and genetic counseling.

**Keywords:** Neurinoma, Arena watch, Toluca, Mexico, Giant toracic

### EP-0321 [Spine and Peripheral Nerve » Spinal Tumors] Epidermoid Cyst of Conus Medullaris: Two Cases Report

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Epidermoid cysts are known as embryonic or acquired ectopic aberrations of the ectoderm. Epidermoid cysts account for less than 1% of all intraspinal tumors. Case 1: A 49 year-old woman presented with low back pain and spasm in her upper legs for five months. All systemic and neurological examination findings were normal. Her MRI revealed that a mass lesion in spinal canal at L3-L4 levels. Case 2: 24 year-old woman applied complaint of loss of strenght in the legs which has paresthesia and spasticity. In her neurological examination, her right leg was paralysed, her left leg was not paralysed but there were 2/5 loss of strenght of muscle of her big toe in plantar end dorsal flexion. Her MRI revealed that a mass lesion in spinal canal at L3-L4 levels. Intramedullary tumor was seen and tumor substance was completely emptied intracapsular in two cases. But the tumor capsule was left in place because of attached to the spinal cord. There was no neurological complication. And the fourth day after the surgery the patients were discharged without any problem. We report two cases of adult intramedullary epidermoid tumor at the conus medullaris although epidermoid tumors have been seen among young or adolescent patients. There are two different surgical approach for intramedullary epidermoid cycts. One defends taking out of all cyct Wall; the second openion advices only evacuation of cyct ingrediants (contents). We advice that only evacuation of epidermoid cyct content is very much enough.

**Keywords:** Conus medullaris, Epidermoid cyst, Surgery

### EP-0322 [Spine and Peripheral Nerve » Spinal Tumors] Pediatric Extradural Thoracic Schwannoma: A Rare Case Report

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Schwannomas are benign tumors originating from Schwann cells. They are mostly seen in adults between 40 and 60 years and rare in children. Pediatric schwannomas often occur in as a part of neurofibromatosis type-2 (NF-2). Most of spinal schwannomas locates intradural extramedullary and extradural location of spinal schwannomas seems so rare especially in pediatric ages. Ten-year-old male child with mid-back pain and no neurological deficit showed low degree scoliosis. Th3 and Th4 spinal tumor was detected in magnetic resonance imaging. Extradural tumor was total excised