```
1
                                                    (eosinophilic granuloma)
                                                                    9
                                                                  가 3,
                                                      :20.5 )
                                                                              가 6
                               6 - 35
                T1
                      T2
                                                                                              (diploic
             space)
                                                                                                    2
                             (9/9)
                         (9/9)
                                                    (8/9)
                                                       T1
               , T2
                                    7 (7/9)
                                                                , 1 (1/9)
                                                                                                , 5
             1 (1/9)
                                                                 4 (4/9)
             (5/9)
                                                               (9/9)
                (eosinophilic granuloma)
                       (tumorlike lesion)
                                          1%
                          Letterer - Siwe disease, Hand -
                                Langerhans 'cell histio -
Schüller - Christian disease
cytosis
                                   (1-4).
                                                                         (craniectomy)
                                                                                                               9
                          (1, 4-6).
                                                                              9
           (4-6)
                                        (4, 7)
                                                                      6 - 35
                                                                                            :20.5 )
                                                                                                         가 3,
                                                             가 6
 가
                           (8-10),
                                                                                         1.5T (Gyroscan ACS - NT,
                                                           Philips, Amsterdam, Netherlands) 0.5T(MRT - 50A,
                                                           Toshiba, Nasu, Japan)
                                                                  T1
                                                                              (TR/TE 400 - 650 msec/14 - 20 msec),
                                                                                    (TR/TE 3000 - 3500 msec/90 -
                                                           120 msec),
                                                                             Gadolinium - DTPA (Magnevist, Schering,
                                                           Germany)
                                                                                T1
                                                              6 mm,
                                                                                  2 mm
                                                                                              (diploic space)
        2000 9
                            2001 2 12
```

281

:

Table 1. Summary of Calvarial Eosinophilic Granuloma

	Case 1	Case 2	Case 3	Case 4	Case 5	Case 6	Case 7	Case 8	Case 9
Sex/Age(yrs)	F/34	F/22	F/14	F/7	F/35	M/28	M/24	F/6	M/15
Site	P	F	F	F	F	O	P	O	P
DS involve	Y	Y	Y	Y	Y	Y	Y	Y	Y
Adj. BM change	N	N	N	N	N	N	N	N	N
TZ distinct	distinct	distinct	distinct	distinct	distinct	distinct	distinct	distinct	distinct
Bone destruction	asym-	asym-	asym-	asym-	asym-	asym-	asym-	sym-	asym-
T1 SI	low	low	iso	high	iso	low	low	high	iso
T2 SI	high	high	high	high	iso	high	high	low	high
Enhancement	inhomo-(BS)	homo-	homo-	homo-	inhomo-(BS)	inhomo-(BS)	inhomo-	inhomo-	homo-
Dura enhanceme	nt Y	Y	Y	Y	Y	Y	Y	Y	Y

P: parietal, F: frontal, O: occipital, Y: Yes, N: No, DS: diploic space, Adj.BM: adjacent bone marrow, TZ: transitional zone, asymmetric, sym-: symmetric, BS: button sequestrum, SI: signal intensity compared with brain cortex, homo-: homogeneous, inhomo-: inhomogeneous

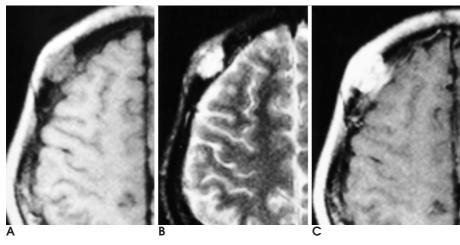


Fig. 1. A 22-year-old woman with eosinophilic granuloma of the right frontal bone.

- **A.** Axial T1-weighted image shows an intradiploic mass hypointense to the gray matter of brain with asymmetric bony destruction.
- **B.** Axial T2-weighted image shows the lesion hyperintense to the gray matter of brain without signal change of the adjacent bone marrow.
- **C.** Gd-enhanced axial T1-weighted image shows strong homogeneous enhancement of the lesion, and the underlying dura is also enhanced.

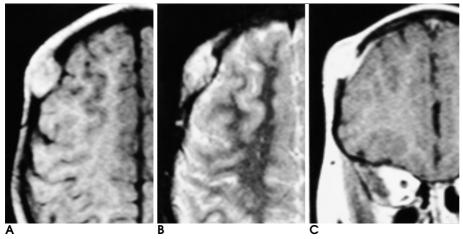


Fig. 2. A 7-year-old girl with eosinophilic granuloma of the right frontal bone.

- **A.** Axial T1-weighted image shows a well-defined, hyperintense, intradiploic mass.
- **B.** Axial T2-weighted image shows hyperintensity of the lesion.
- **C.** Gd-enhanced coronal T1-weighted image shows dense homogeneous enhancement of the lesion, distinct transitional zone, and enhancement of the adjacent dura.

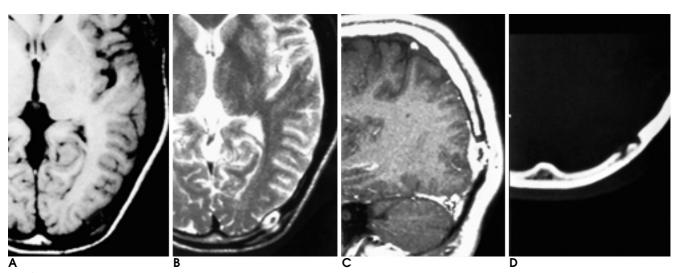


Fig. 3. A 28-year-old man with eosinophilic granuloma of the left occipital bone.

- **A, B.** A well-defined intradiploic mass containing central dark signal intensity shows low signal intensity on T1-weighted image(A), and high signal intensity on T2-weighted image(B).
- **C.** Gd-enhanced sagittal T1-weighted image shows heterogeneous enhancement of the lesion with central dark signal intensity, and adjacent dura enhances.
- **D.** Precontrast CT scan with bone setting shows an osteolytic lesion with a central high density representing a button sequestrum.

(8 - 10). Histiocytosis X Langerhans ' cell histiocytosis (1). 가 (3). 가 Mirra (12) (punch - out defect) 가 가 가 (5, 6). (7), Mirra Beltran (9) 16 가 가

2	가					
		가				
Murayan	na (10) T2					1 T
Schepper	(8) 11	1 2				•
Т -	⁻ 1	_	-	:	, T2	
T1				•		, Т
	, -		T1			
,	Scheppe	r (8)		Murayan	na (10	0)
	,		, 5	•	3	
	,		,		2	
	가기	ŀ	,	,		
		, (rad	, diating	trabecular))	, T1
(13	(13,1 3,15)	4),				

- 가 , 가 (13).
- T1
- , T2 , '1 .
- ,
- 1 . Resnick D. Diagnosis of bone and joint disorders. 3rd ed.
 Philadelphia: Saunders, 1995:2214-2221
 2. Lieberman PH, Steinman RM, Smith J, Pilar GC, Martin SP.
 - Langerhans 'cell granulomatosis. Am J Surg Pathol 1996;20:519-552
 Favara BE. Langerhans 'cell histiocytosis pathobiology & pathogenesis. Semin Oncol 1991;18:3-7
 - Stull MA, Kransdorf MJ, Devaney KO. Langerhans 'cell histiocytosis of bone. *Radiographics* 1992;12:801-823
 - David R, Oria RA, Kumar R, et al. Radiologic features of eosinophilic granuloma of bone. AJR Am J Roentgenol 1989;153: 1021-1026
 - Fisher AJ, Reinus WR, Friedland JA, Wilson AJ. Quantitative analysis of the plain radiographic appearance of eosinophilic granuloma. *Invest Radiol* 1995;30:466-473
 - 7. Mitnick JS, Pinto RS. Computed tomography in the diagnosis of eosinophilic granuloma. *J Comput Assist Tomogr* 1980;4:791-793
 - 8. Schepper AM, Ramon F, Marck EV. MR imaging of eosinophilic granuloma:report of 11 cases. *Skeletal Radiol* 1993;22:163-166
 - Beltran J, Aparisi F, Bonmati LM, Rosenberg ZS, Present D, Steiner GC. Eosinophilc granuloma: MRI manifestations. Skeletal Radiol 1993;22:157-161
 - Murayama S, Numaguchi Y, Robinson AE, Richardson DE. Magnetic resonance imaging of calvarial eosinophilic granuloma. J Comput Assist Tomogr 1988;12:251-252
 - 11. Rawlings III CE, Wilkins RH. Solitary eosinophilic granuloma of the skull. *Neurosurgery* 1984;15:155-161
 - 12. Mirra JM, Gold RH. *Eosinophilic granuloma*. In Mirra JM ed. Bone tumor. philadelphia: Lea & Febiger, 1989:1021-1039
 - Arana E, Bonmati LM. CT and MR imaging of focal calvarial lesions. AJR Am J Roentgenol 1999;172:1683-1688
 - 14. Bastug D, Ortiz O, Schochet SS. Hemangiomas in the calvaria: Imaging findings. *AJR Am J Roentgenol* 1995;164:683-687
 - Arana E, Latorre FF, Revert A. Intradiploic epidermoid cysts. Neuroradiology 1996;38:306-11

MR Findings of Calvarial Eosinophilic Granuloma¹

Gi Bok Choi, M.D., Seok Hyun Son, M.D., Choong Ki Eun, M.D., Sung Kun Park, M.D., Sang Suk Han, M.D., Sun Seob Choi, M.D.², Seong Min Kim, M.D.³, Chang Soo Kim, M.D.⁴

¹Department of Diagnostic Radiology, Pusan-Paik Hospital, Inje University ²Department of Diagnostic Radiology, Medical College, Dong-A University ³Department of Diagnostic Radiology, Medical College, Kosin University ⁴Department of Diagnostic Radiology, Maryknoll Hospital

Purpose: The purpose of this study was to evaluate the MR findings of calvarial eosinophilic granuloma.

Materials and Methods: We reviewed the MR imaging studies of nine patients [M:F=3:6, aged 6-35 (mean, 20.5) years] with pathologically proven eosinophilic granuloma in the calvaria. The findings were evaluated for involvement of the diploic space, changes in adjacent bone marrow, distinction of the transitional zone, pattern of bone destruction, signal intensity and contrast enhancement of the tumor, and contrast enhancement of the adjacent dura.

Results: All lesions involved the diploic space, showed no change in adjacent bone marrow, and had a distinct transitional zone. In most (8/9) cases there was asymmetric bony destruction. On T1-weighted images, signal intensities of the tumors varied, while on T2-weighted images, hyperintensity was observed in seven cases, isointensity in one, and hypointensity in one. After the administration of contrast material, enhancement was homogeneous in four cases and inhomogeneous in five. Enhancement of the adjacent dura was demonstrated in all nine cases.

Conclusion: The characteristic MR findings of calvarial eosinophilic granuloma are variable signal intensity on T1WI, high signal intensity on T2WI, and marked contrast enhancement; in addition, there is a distinct transitional zone, asymmetrical bony destruction, and associated dural enhancement.

Index words : Skull, MR
Histiocytosis
Bone neoplasms, MR

Address reprint requests to : Gi Bok Choi, M.D., Department of Diagnostic Radiology, Pusan Paik Hospital, College of Medicine, Inje University, 633-165 Gaekum-dong, Pusanjin-gu, Pusan 614-735, Korea.

Tel. 82-51-890-6579 Fax. 82-51-896-1085 E-mail: choi0527@chollian.net

2001 ()

		I	
	2001	01. 1. 31()	
		01. 2.28()	
ECR	2001 ECR	01. 1.31()	
		01. 2.28()	
,	2000	01. 1. 31()	
	2001		
ECR 2001	2001 13. ECR	01. 3. 2()-6()	Vienna Wien Austria
SGR 2001	30th Society of Gastrointestinal	01. 3. 25() - 30()	Scottsdale Arizona:
	Radiologists		Marriott Camelback USA
		01.	
ISMRM 2001	9th International Society for	01. 4. 21() - 27()	Glasgow: Scottish
	Magnetic Resonance in		Exhibition & Conf. Centre
	Medicine		UK
ASNR 2001	ASNR 39th American Society	01. 4. 21() - 27()	Boston Massachusetts
	of Neuroradiology		
ARRS 2001	101th Americal Roentgen Ray	01. 4. 29() - 5. 4()	Seattle Washington
	Society		
	2001	01. 5. 11() - 12()	
	2001	01. 5. 17() - 18()	
		01. 4. 28()	
가	2001 가	01. 5. 26() 14:00 -	7
		01. 4. 28()	
,		01. 5. 31()	
	23	01. 6. 9()	
		01. 4. 28()	
		01. 4. 28()	
	2002 Scholarship	01. 7. 31()	
	2002 Fellowship	01. 7. 31()	