



1

1

17 가

. CT MRI

가

.

,

.

2 - 8%

60%

(Fig. 1A).

, T1

40%

(1 - 3).

50 - 83%

(2 -

(Fig. 1B). T2

4).

(3).

(exophytic)

. T2

(Fig. 1C).

가

가

T1

(Fig. 1D, E).

1

(Fig. 1F, G).

가 (Fig. 1H).

17

가

가 (Fig. 2A).

(Fig. 2B).

29.7 gm, 6×4×2

cm

, 10 - 15% Ki - 67

2007 7 31

2007 10 4

(5). 50 - 83%
가 , 94% 4 cm
(4, 6). 40 - 80%
, 가 (1, 3).
, 가
(1, 2). (1 - 3).
(rest cells)
, 2/3 3 가
(flexure) (tela choroidea)
가 (aberrant) 가 ,

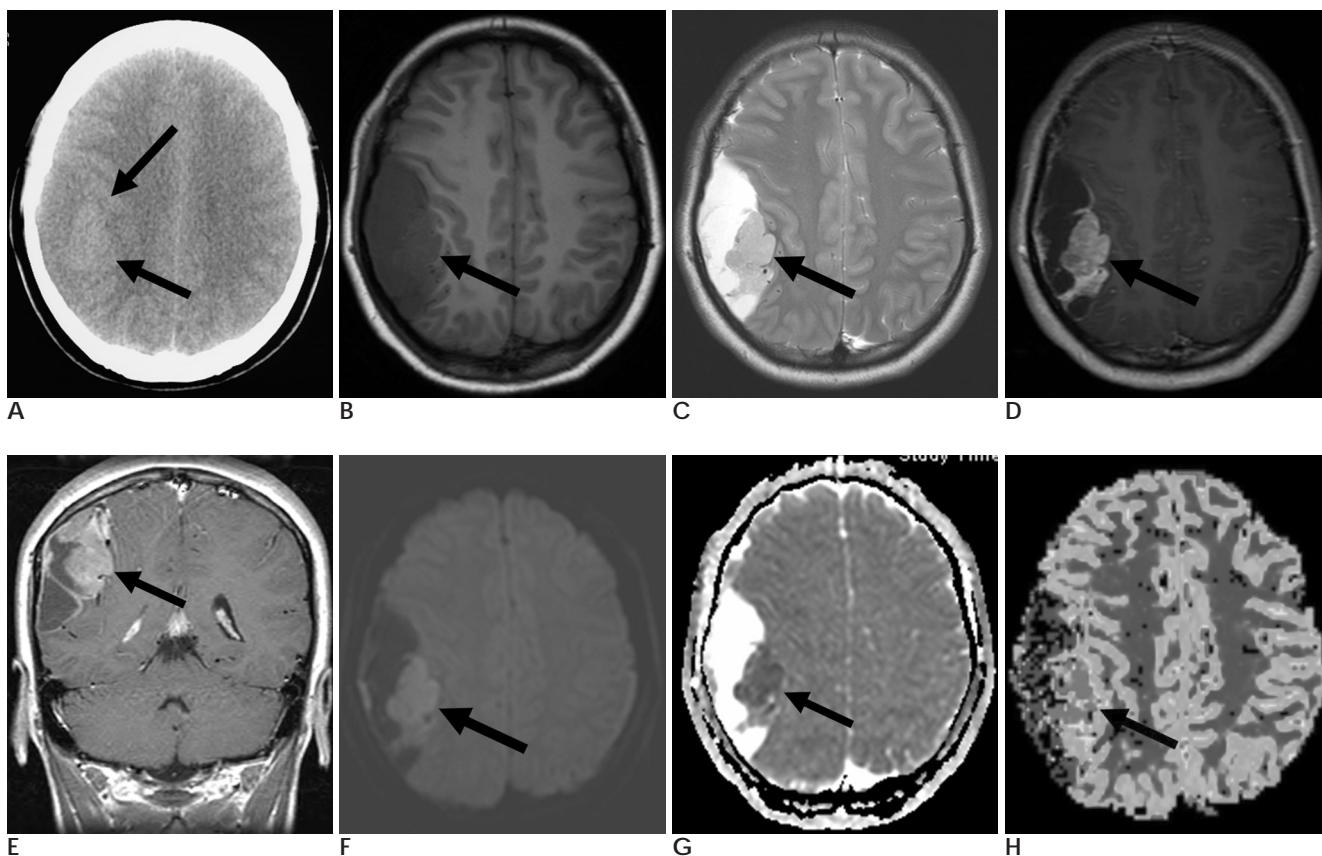


Fig. 1. A. Axial unenhanced CT scan of the brain shows a space-occupying lesion at the right frontoparietal convexity (arrows). B. Axial T1-weighted image shows the solid portion of the mass isointense to the gray matter (arrow). C. Axial T2-weighted image clearly shows the tumor consisting of two parts. The solid portion of the tumor is isointense or slight hyperintense to the gray matter (arrow). D, E. Axial (D) and coronal (E) gadolinium-enhanced T1-weighted images show moderate enhancement of the tumor with unenhancing cystic portion (arrow). F, G. The solid portion of the tumor is slightly hyperintense to the gray matter on diffusion-weighted image with restriction of diffusion on ADC map (arrow). H. Perfusion-weighted MR image shows increased cerebral blood volume in the solid part of tumor (arrow).

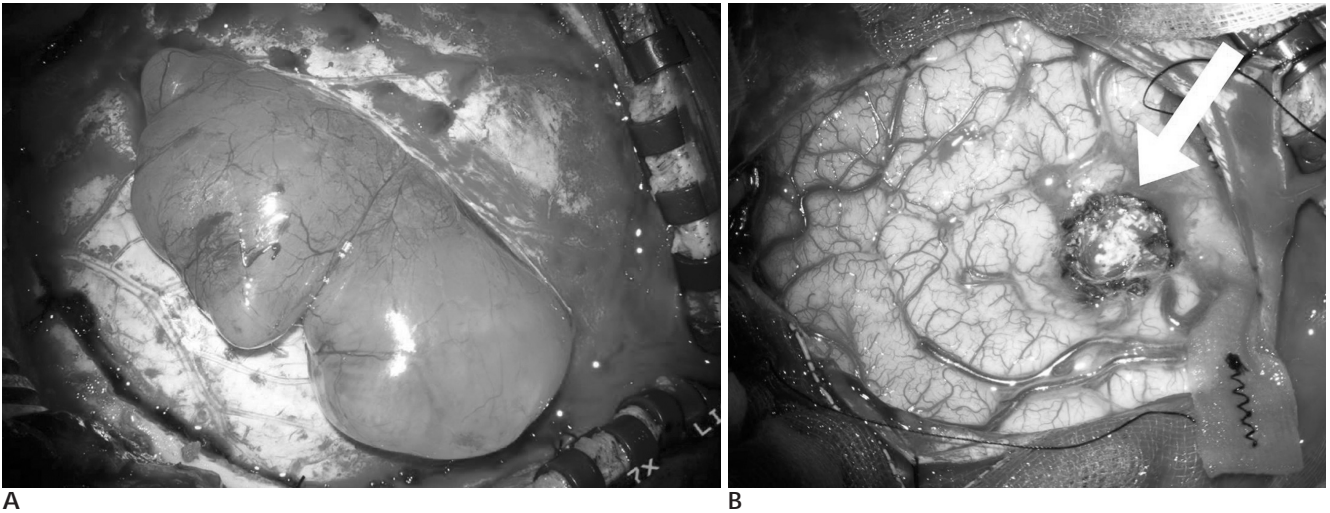


Fig. 2. Intra-operative photographs.

A. A yellowish mass is revealed without adhesion or attachment to the dura.

B. A clear dissection plane is achieved between the tumor and cortex except for a small part, which appears to be a stalk from the brain parenchyma (arrow).

가 . , (pleomorphic xanthoastrocytoma), (pilocytic astrocytoma), (ganglioglioma) , (atypical meningioma) 가 (astrocytoma) (primitive neuroectodermal tumor), (oligodendroglioma) 가 .

(7, 8).

가

가

;

가

가

가

, T2

T2

가

T2

가 가

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A Case of Supratentorial Intra-axial Ependymoma Showing Exophytic Growth¹

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A 17-year-old female had headache for several weeks and she developed an episode of seizure one day prior to admission. She underwent both CT and MRI, which both revealed a large tumor with cystic and solid portions at the right frontoparietal convexity. During operation, a well-defined tumor was found to have a stalk connecting the tumor itself with the brain parenchyma, proving that it was growing exophytically and expanding into the subarachnoid space. Histopathological examination revealed an anaplastic ependymoma with high cellularity. We report here on this case of an unusual supratentorial ependymoma with exophytic growth, and this can be mistaken as another exophytic growing intra-axial tumor or even as an extra-axial tumor.

Index words : Ependymoma
Supratentorial neoplasms
Magnetic resonance (MR)

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