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颅内原发性胶质肉瘤MRI表现及误诊分析

MRI features of primary cerebral gliosarcoma and analysis of misdiagnosis

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中文摘要:

目的 分析颅内原发性胶质肉瘤的MRI表现特征,分析误诊原因。方法 回顾性分析经手术病理证实的12例颅内原发性胶质肉瘤的MRI、病理及临床表现。结果 12例肿瘤均位于幕上,大小不等,边界较清晰;10例T1WI肿瘤实质表现为低信号、T2WI高信号,2例T1WI、T2WI均呈等信号;FLAIR均呈高信号;肿瘤实质区DWI为高信号;增强扫描11例呈明显不均匀强化,1例为轻中度不均匀强化。本组 3例误诊为脑膜瘤,1例误诊为室管膜瘤,1例误诊为淋巴瘤,1例误诊为毛细胞星形细胞瘤。结论 胶质肉瘤的MRI表现具有一定特征。MRI能清楚显示病灶实质及周围水肿范围,有助于鉴别诊断及预后评估。

英文摘要:

Objective To analyze MRI features of primary cerebral gliosarcoma, and to analyze causes of misdiagnosis. **Methods** MRI features, pathological results and clinical manifestations of 12 patients with primary cerebral gliosarcoma proved by operation and pathology were retrospectively analyzed. **Results** All masses located supratentorial with various sizes and well defined contours. Tumors in 10 cases showed hypointensity on T1WI and hyperintensity on T2WI, only 2 were isointensity on T1WI and T2WI. Tumors in all cases showed hyperintensity on FLAIR. On DWI, the solid portion of tumors were hyperintensity. Tumors in 11 cases demonstrated obviously heterogeneous enhancement, while in 1 case heterogeneously enhanced mildly to moderately. Among 12 cases, 3 were misdiagnosed as meningiomas, 1 as lymphoma, 1 as ependymoma and 1 case as pilocytic astrocytoma. **Conclusion** MRI features of gliosarcoma have some characteristics. MR examination can not only demonstrate the scope of tumor and edema, but also contribute to differential diagnosis and prognostic evaluation.

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