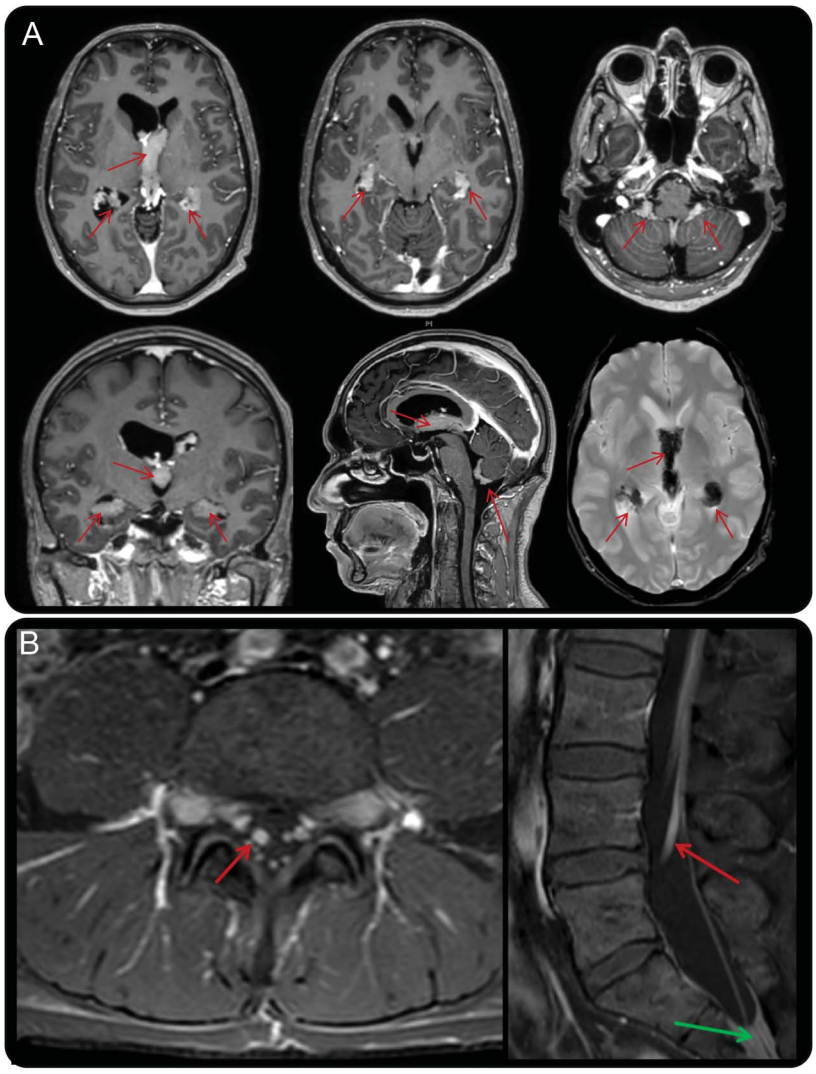
Figure MRI



(A) Brain MRI (gadolinium-enhanced T1 sequences and T2*) shows granulocytic sarcoma of the choroid plexus. Choroid plexuses are diffusely enlarged (arrows), without hydrocephalus. Note that there is no associated meningeal lesion. (B) Lumbar MRI shows signs of neoplastic meningitis: epidural infiltration in the cauda equina (green arrow) and enlargement with enhancement of L5 (red arrows).

A 38-year-old patient with type 5 acute myeloid leukemia relapsed after 4 years of treatment including chemotherapy and bone marrow transplant. He underwent imaging for vertigo, with an otherwise normal neurologic examination. Brain MRI showed diffuse choroid plexus enlargement, without hydrocephalus, a rare typical image of granulocytic sarcoma (figure, A).[1] The patient also had spine MRI, to explore right L5 radiculopathy, which showed signs of meningitis with radicular and diffuse epidural enhancement (figure, B).

Granulocytic sarcoma, or chloroma, is a tumor composed of immature granulocytes, associated with systemic leukemia, usually acute myelogenous leukemia. Common locations are soft tissues, bone, peritoneum, and lymph nodes.

Caroline Apra, MD, MSc, Pierre Bourdillon, MD, MSc

From Sorbonne Universités (C.A., P.B.), Université Pierre et Marie Curie; Brain and Spine Institute (C.A., P.B.), INSERM U1127, CNRS 7225, Paris; Department of Neurosurgery (C.A., P.B.), Hospices Civils de Lyon, Hospital for Neurology and Neurosurgery Pierre Wertheimer; and Université de Lyon (P.B.), Université Claude Bernard, France.

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Correspondence to Dr. Apra: caroline.apra@neurochirurgie.fr

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