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A case report on Clival lipoma

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Abstract

Lipoma of bone is a benign fat containing tumour with most common site being the Calcaneum and Long bones. Lipoma of Skull is very rare with less than 10 cases reported till date. We Presented a case of Clival Lipoma of 43 yr. Old Male with complain of Headache. We performed CT initially which shows a Lytic lesion involving the Clivus. MRI Shows T1 and T2 Hyper intense lesion seen involving clivus which is not showing enhancement in post contrast film.

Keywords: Clival lipoma, MRI, Lipoma of bone

Introduction

Lipoma is a slowly growing benign tumour. It is a fat containing tumour. It has no age predilection & can from children to old. Bony lipoma occur in medullary cavity & slow growing so detected incidentally in most cases. Intraosseous lipoma is rare and skull involvement is even rarer. Accurate Identification of lipoma is essential to avoid surgery. Milgram analysed percent with intraosseous Lipoma and divided it in to 3 stages.

Stage1: Lipoma as solid fatty lesion

Stage2: Fatty lesion with calcification or necrosis.

Stage3: Advance Lipoma with multiple necrosis, calcification and cyst formation

Case discussion

We Present a case of 43 yr. old male came to our Centre with complain of Headache. On CT scan the brain was normal however a hypo dense fatty density lesion seen involving left half of clivus. The density of the lesion was found to be around -26 to -56. The margin of the lesion is well-defined and sclerotic in nature indicating the benign nature of the lesion (figure-1)

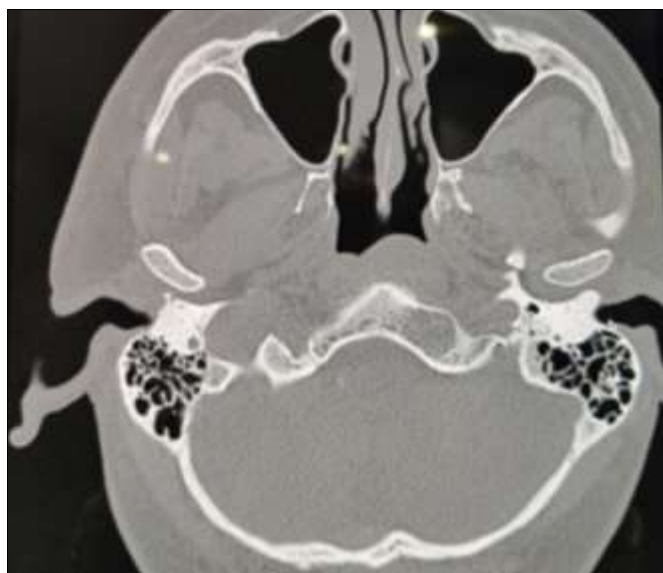


Fig 1: CT scan showing a hypo dense fat density lesion in the clivus.

Than a dedicated MRI study with contrast of brain done. The lesion found to be hyper intense in both T1 and T2 with hypo intense sclerotic margin indicating benign fat

containing (lesion figure-2, 3). On fat-suppressed post contrast study the lesion got suppressed in fat with no evidence of any enhancement suggesting lipoma (figure-4).

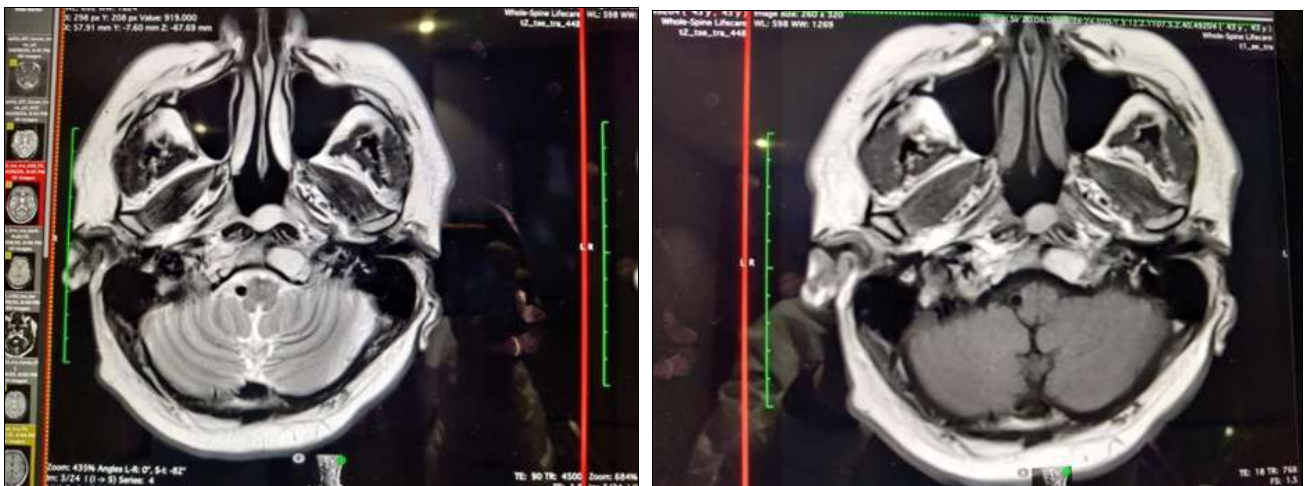


Fig 2-3: Axial images demonstrate high T1 and T2 signal intensity with hypo intense sclerotic rim indicating benign nature of the lesion

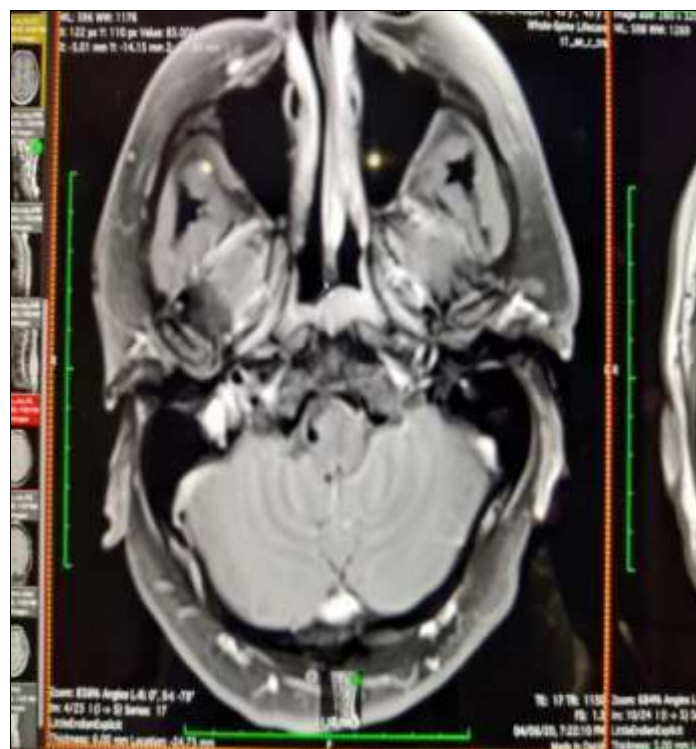


Fig 4: Post contrast fat-suppressed T1 sequence demonstrates loss of signal with no evidence of any post contrast enhancement

Conclusion

The typical appearance of lipoma in CT as fat-containing lesion and MRI with hyper intense signal in T1 and T2 which is getting suppressed in fat-suppressed sequence help in confirming the diagnosis and indicates its benign nature and help the referring clinician in further management of the Patient

Conflict of interest: No Conflict of interest

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