Calcifying pseudotumor of the neuroaxis—a case report


Abstract

The calcifying pseudotumor of the neuroaxis (CAPNON) is a rare lesion affecting the central nervous system, still without a clear origin, both neoplastic and/or reactional processes being under consideration and investigation. It is considered benign and non-infiltrative, symptoms being associated with compression of the surrounding tissue. There are less than 60 cases reported worldwide, only one fourth located at the spinal cord. Our objective is to describe one of such cases due to its rarity and important differential diagnosis with neoplasia, where adjuvant treatment is eventually necessary, unlike CAPNON where excision is curative. A 31-year-old male with progressive paresis of the lower limbs for 9 years. CT at the beginning of the symptoms showed calcified intramedullar nodule at T8 level, measuring 1,9 x 0,9 x 0,6 cm. The lesion showed no growth in the period, but symptoms worsen and exeresis was performed. Gross appearance was of a soft mass covered by a calcified shell, and microscopic examination showed fibrous stroma surrounding highly pleomorphic epithelioid cells although no mitosis was identified. Osseous metaplasia was also extensively observed. Immunostaining showed EMA positivity and negative GFAP, CK pool and PR, eliminating carcinomas, gliomas and meningiomas as candidates. CAPNON must be considered a possible candidate when dealing with extensively calcified lesions of the SNC. Its morphology is extremely variable, and only a few of the aspects are generally present in every case. Immunohistochemistry and a benign evolution are fundamentals of the diagnosis and help differentiating from neoplastic lesions.