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HEREDITARY MULTIPLE EXOSTOSES WITH SPINAL CANAL INVOLVEMENT

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A 15-year-old female with a history of paraparesis, bilateral patellar hyperreflexia and T9-T10 sensory level, with a history of surgery in the right humerus 10 years ago osteochondroma resection. Spine MRI showed an amorphous lesion on the anterior left T2 level with epidural and foraminal components causing compressive myelopathy (Fig. 1). Additional assessment by CT demonstrates greater conspicuity of the lesion, with cortical and medullary components contiguous to the vertebral body and pedicle (Fig. 2). Also, there was another similar lesion on the posteromedial aspect of the left costal arch with a posterior foraminal extension at T7 level (Fig. 2). The patient was submitted to neurosurgery for resection of the largest lesion at T2 level, with resolution of the spinal symptoms.

Hereditary multiple exostosis is a rare and benign condition characterized by anomalous bone development of osteochondromas. They can arise from long or flat bones and may cause complications including pain, deformities, restricted motion, bursitis, neurovascular compression, and malignant transformation (5% of cases). Involvement of the vertebrae is less commonly seen, with most of the cases affecting the cervical spine. Thoracic spine involvement with associated compression of the spinal cord or nerve roots has been rarely described.

Figure 1 |

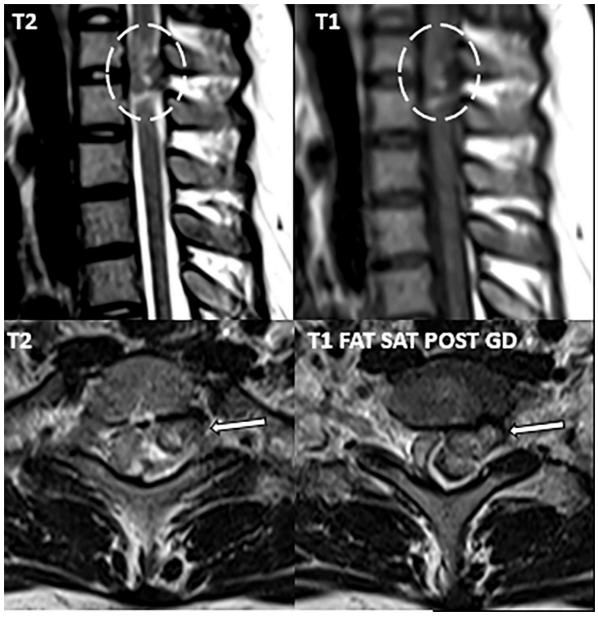

Figure 2 |