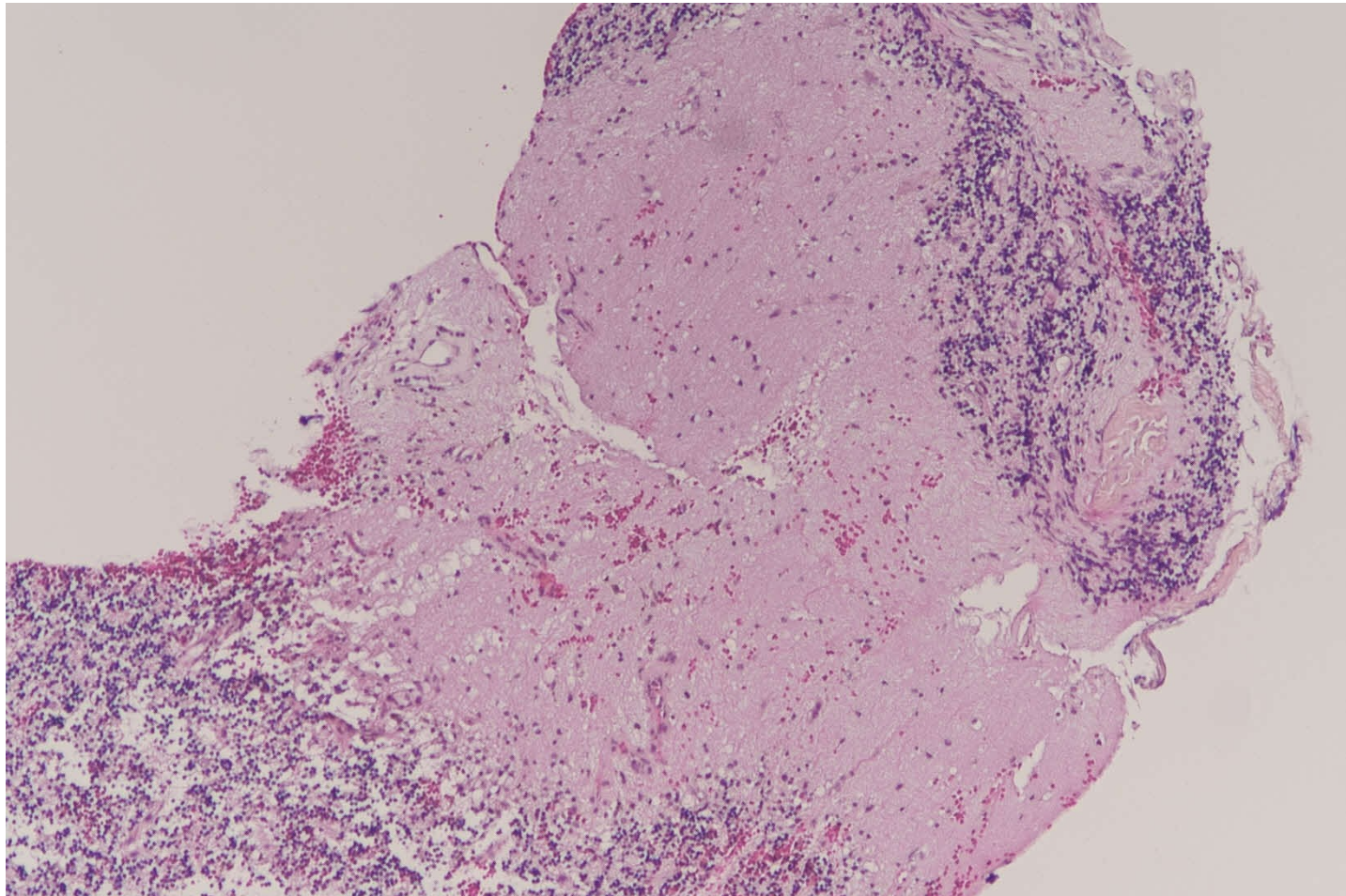
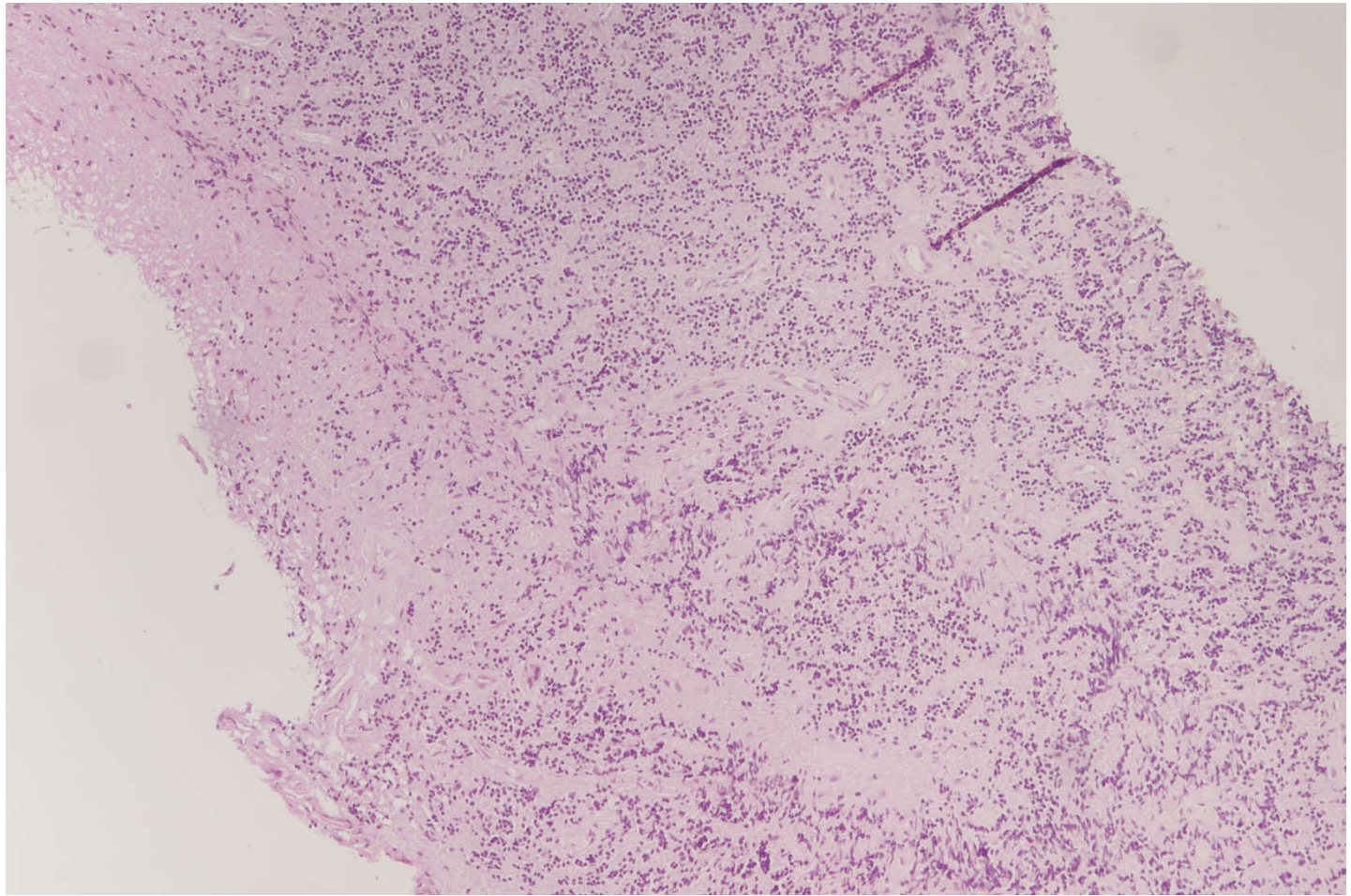


# 內科病理聯合討論會

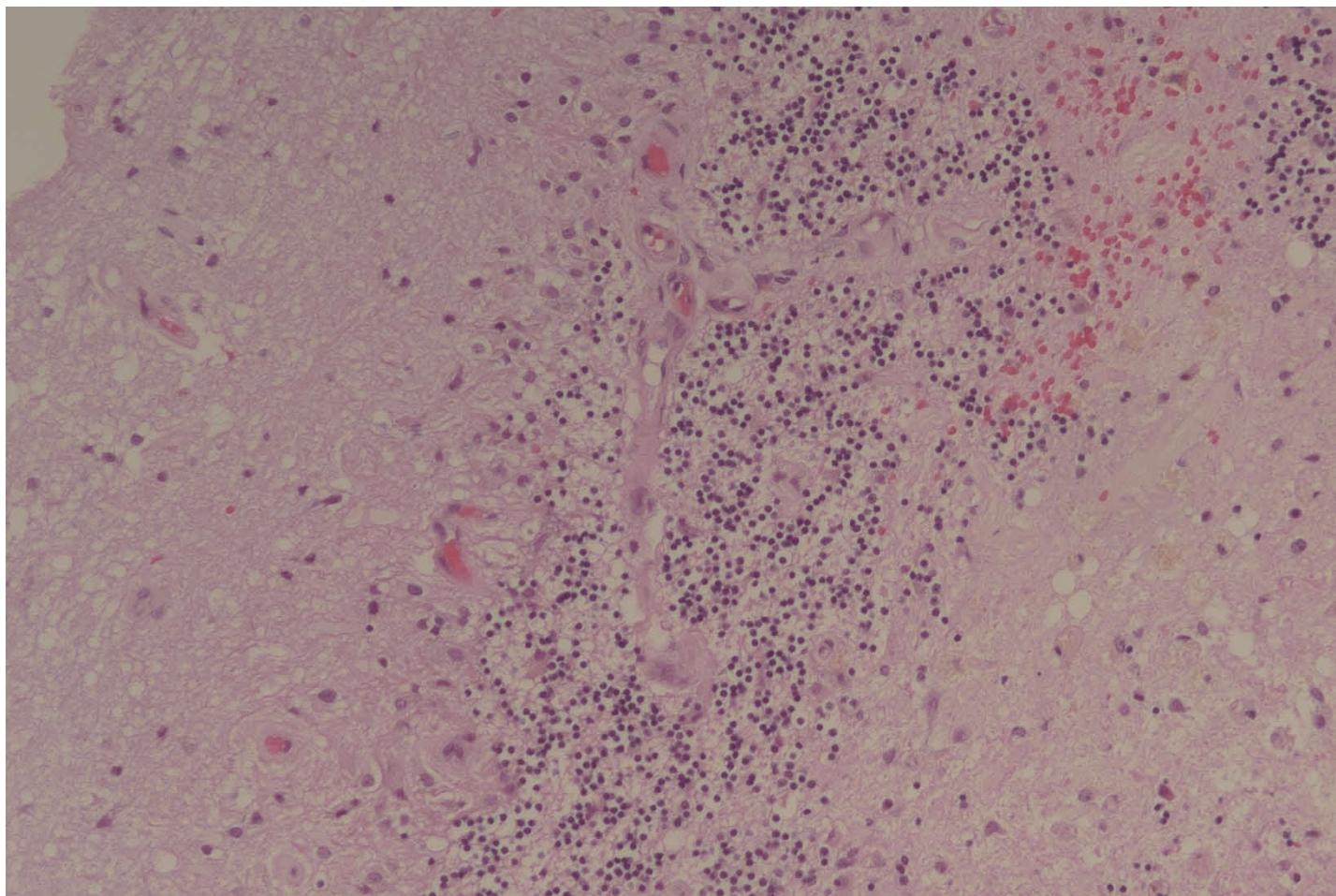
報告者：傅婷瑛  
時間：105.12.22

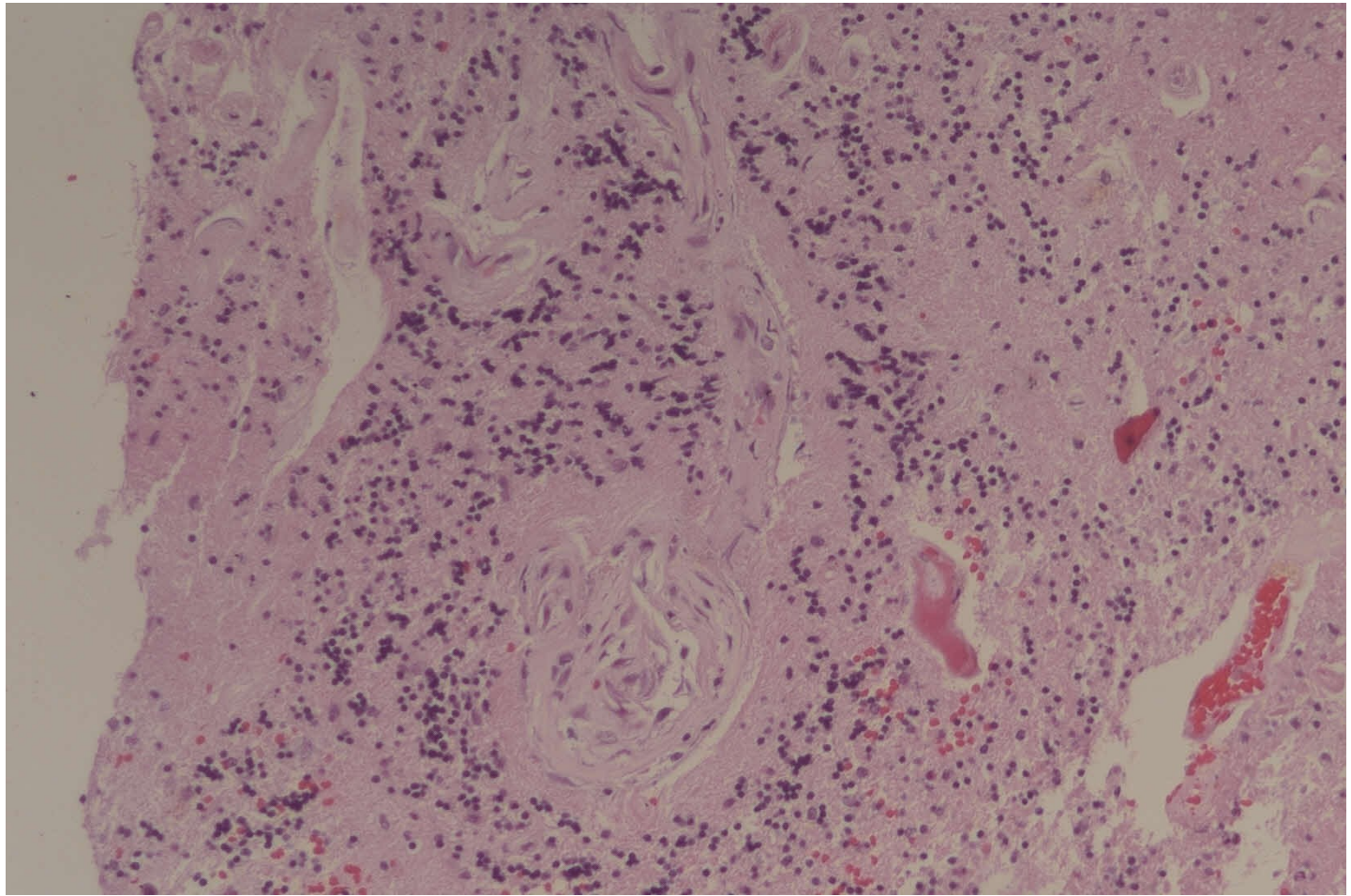
# 104.12.20 Normal cerebellum tissue



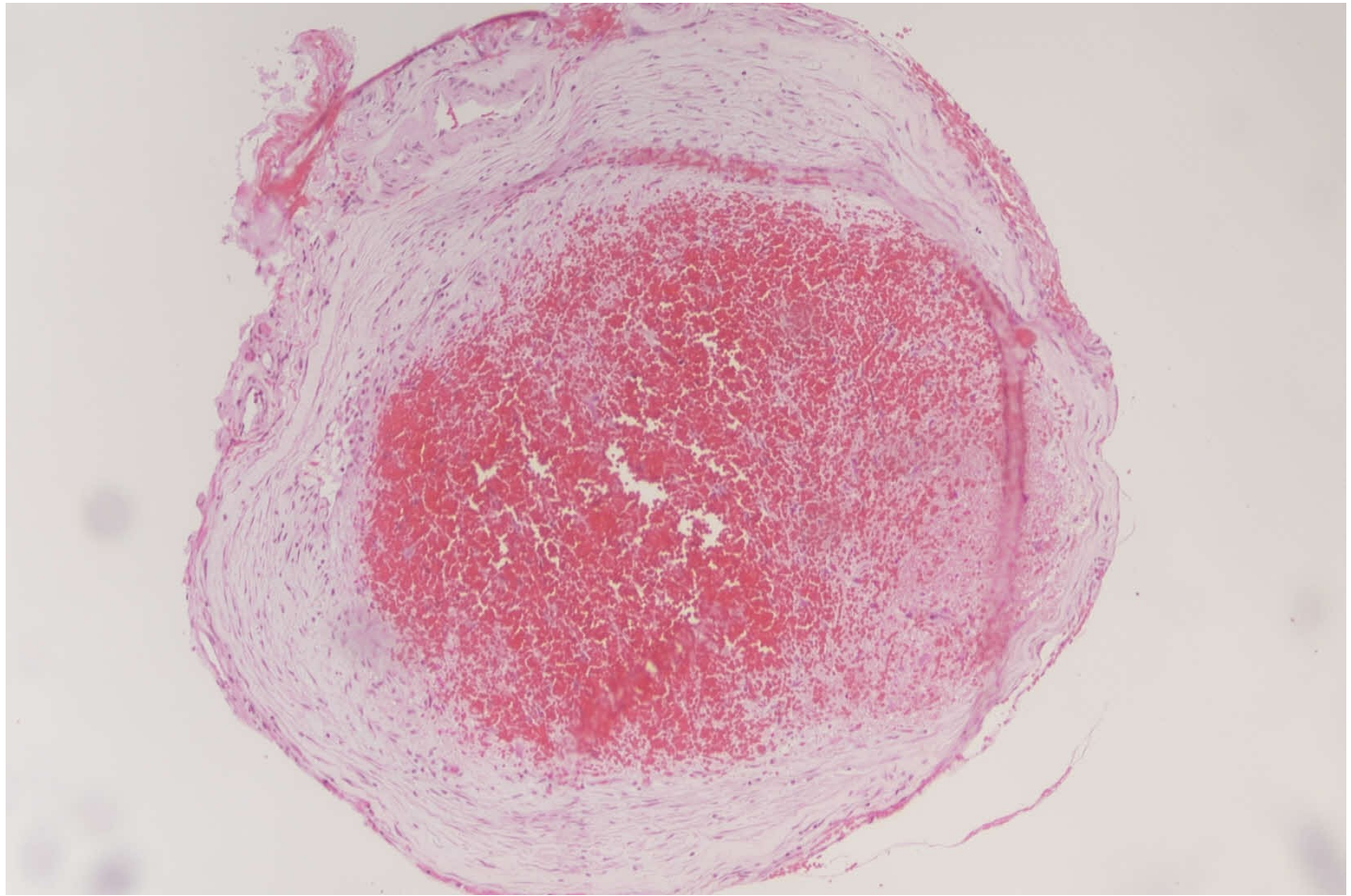


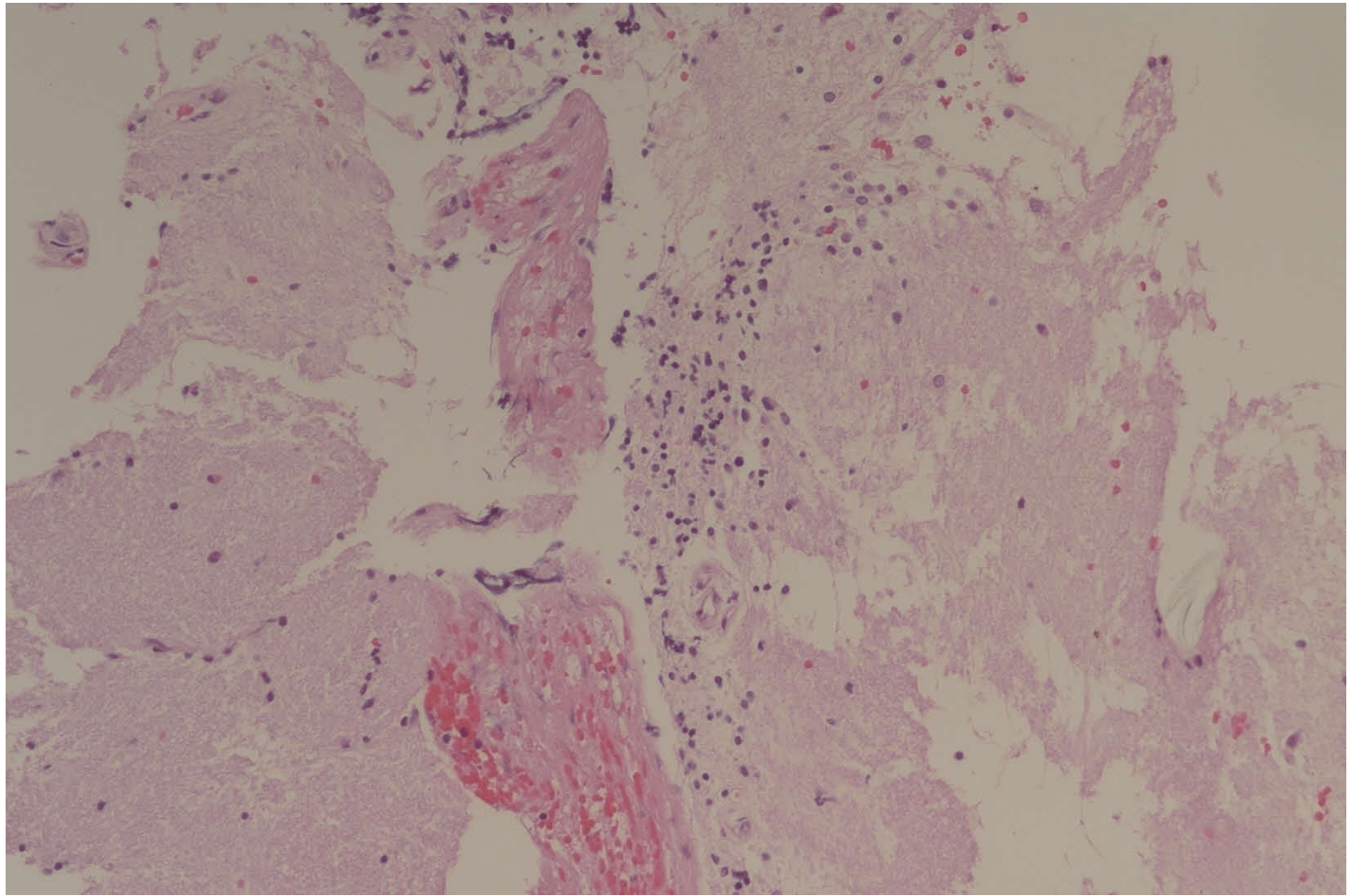
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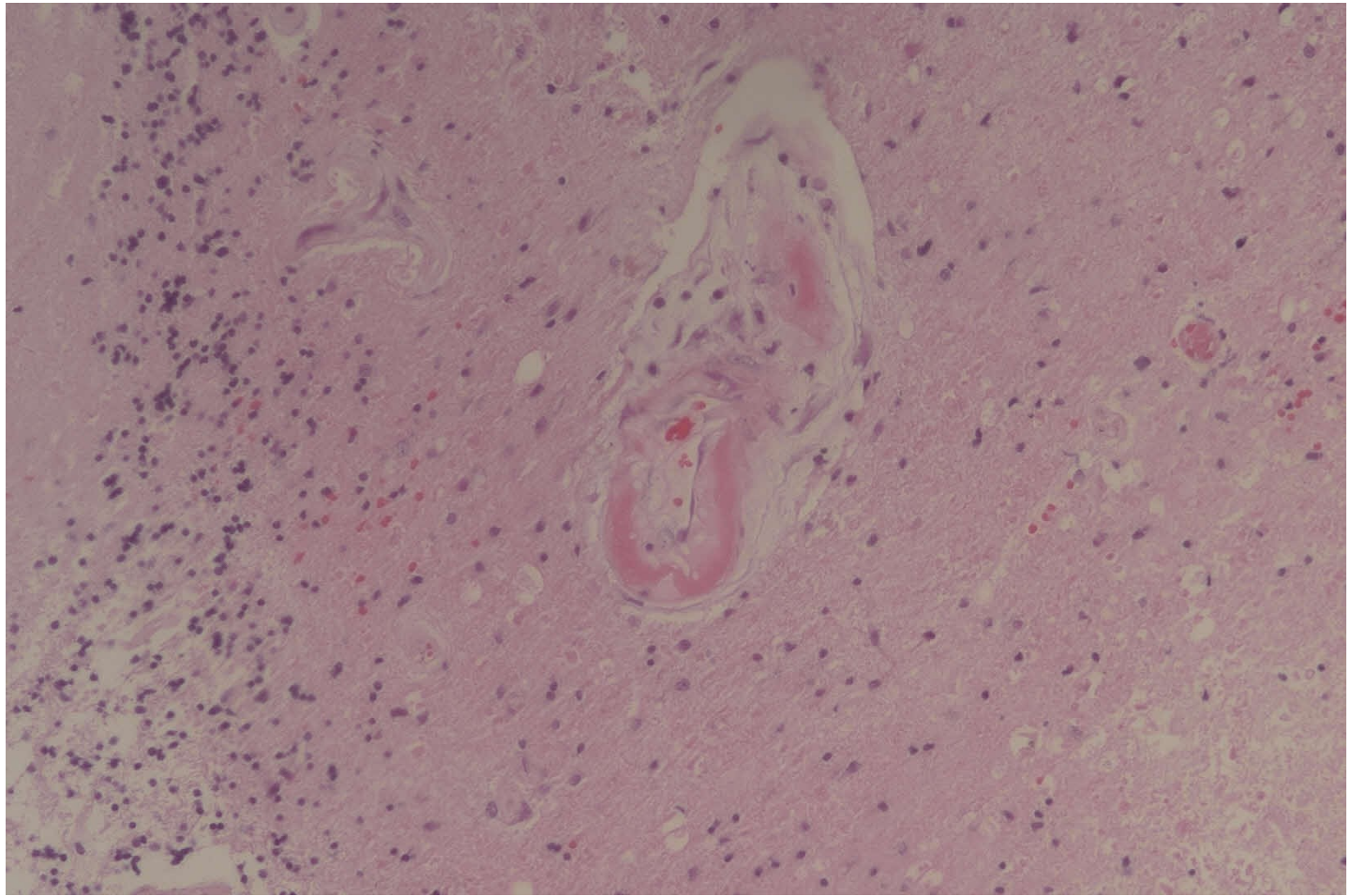




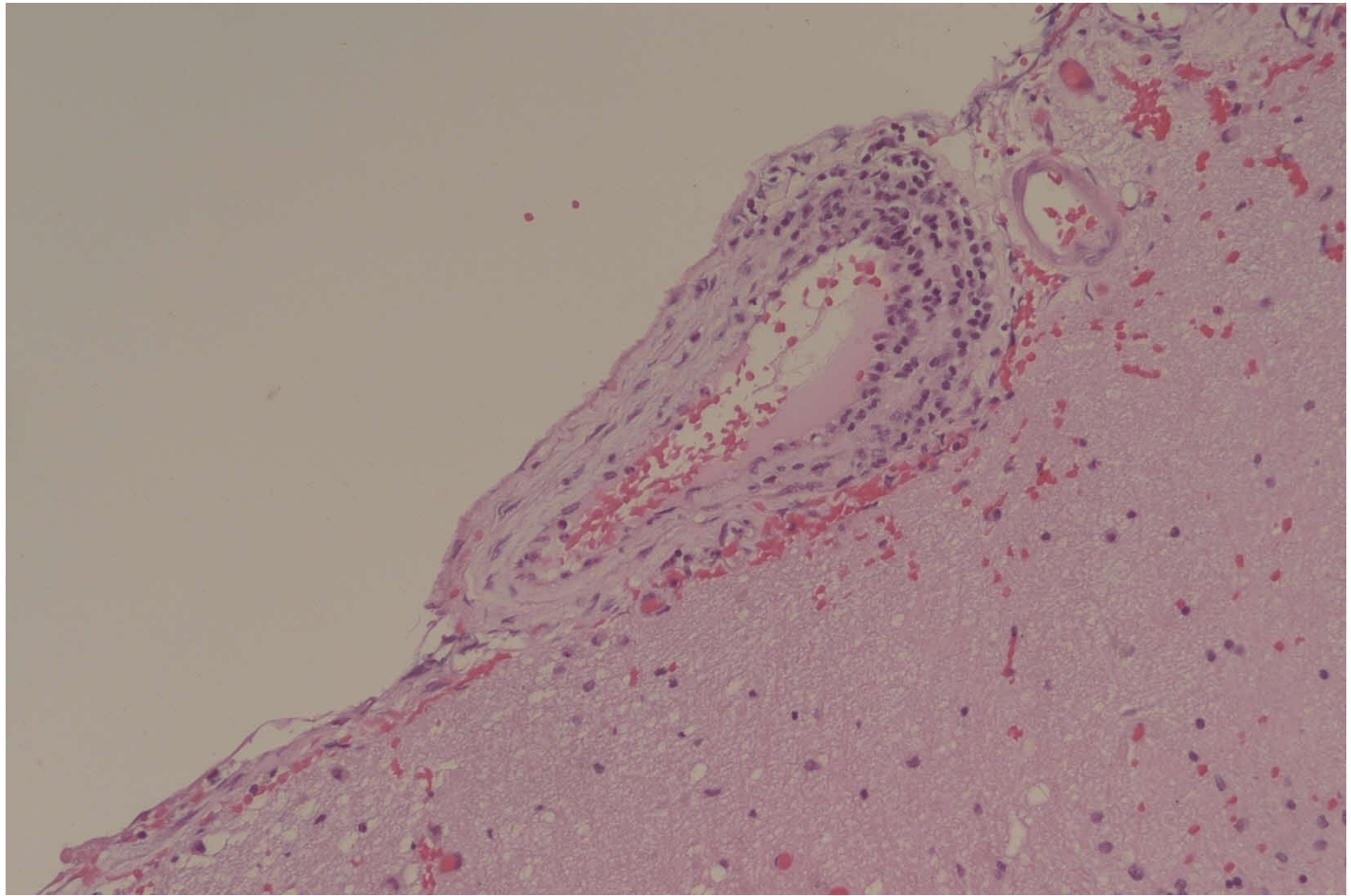
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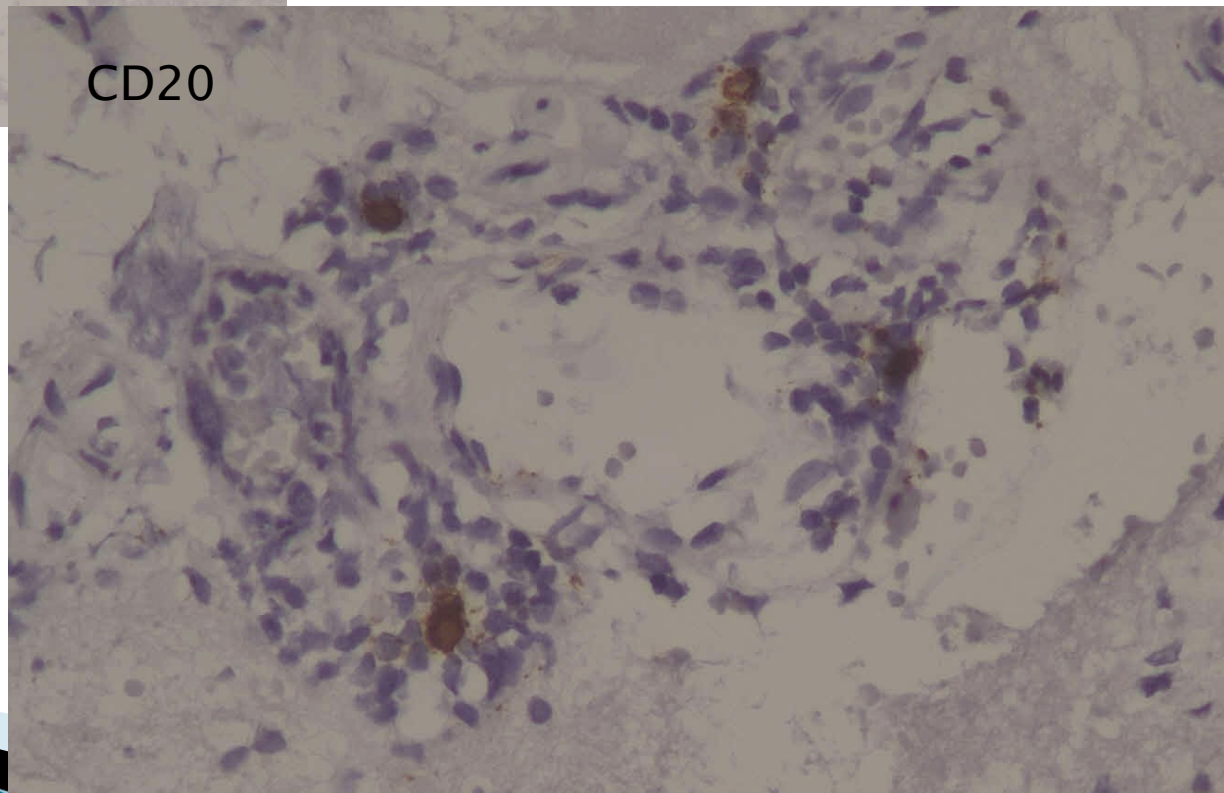
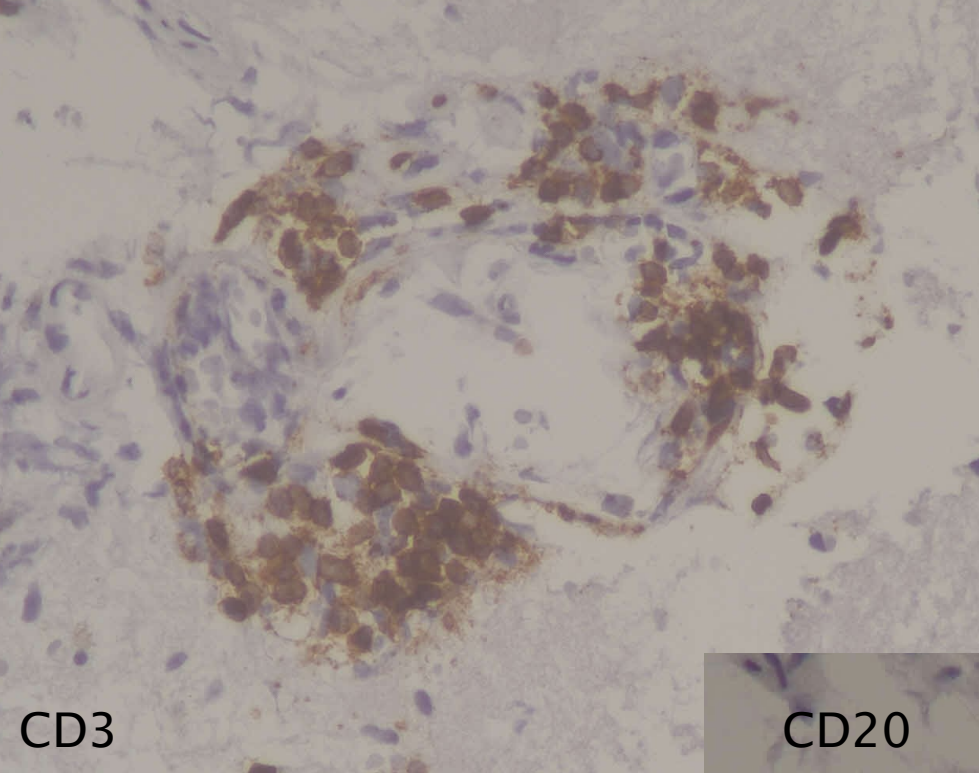












是否可診斷vasculitis?



Yes

Perivascular lymphocytic infiltrate

Fibrinoid necrosis

# CNS vasculitis

- ▶ Central nervous system (CNS) vasculitis refers to a broad array of diseases that result in **inflammation and destruction of the blood vessels** of brain, spinal cord and the meninges.
- ▶ CNS vasculitis is classified into **primary and secondary**.
- ▶ PACNS was initially reported in 1959, when Cravioto and Feigin reported pathologic findings of CNS vasculitis when examining brain autopsies

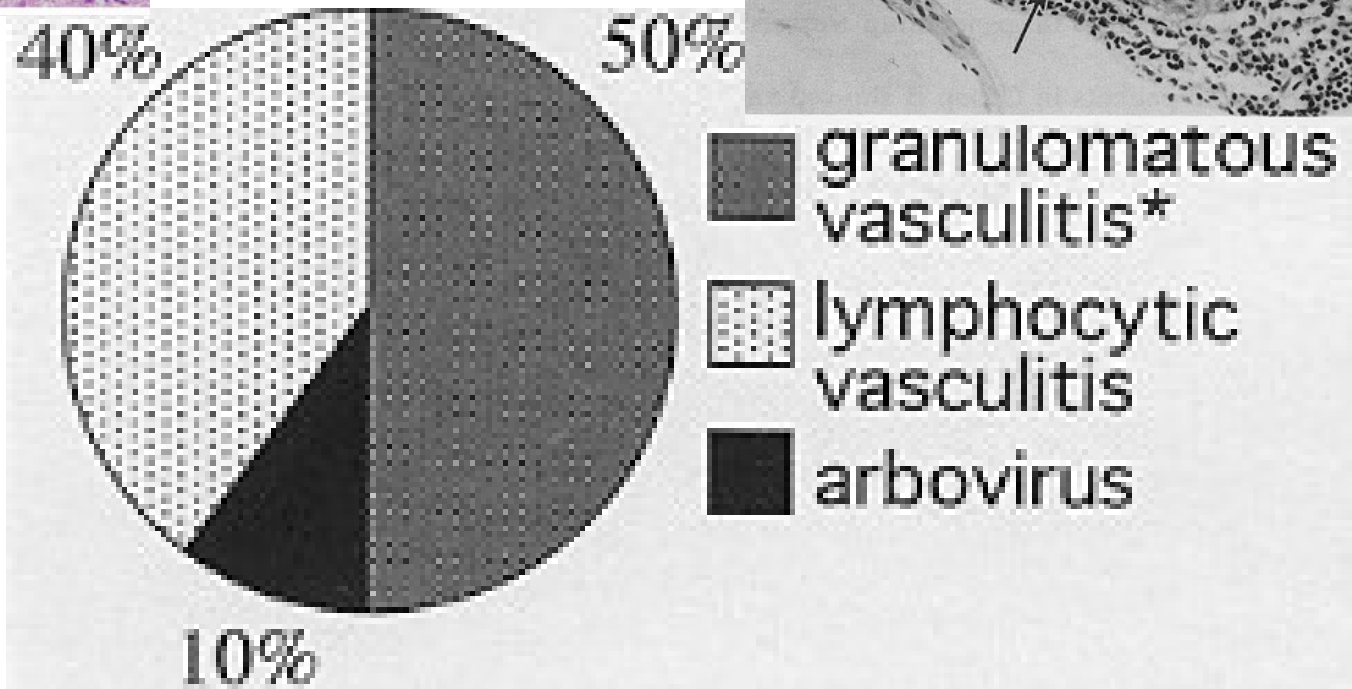
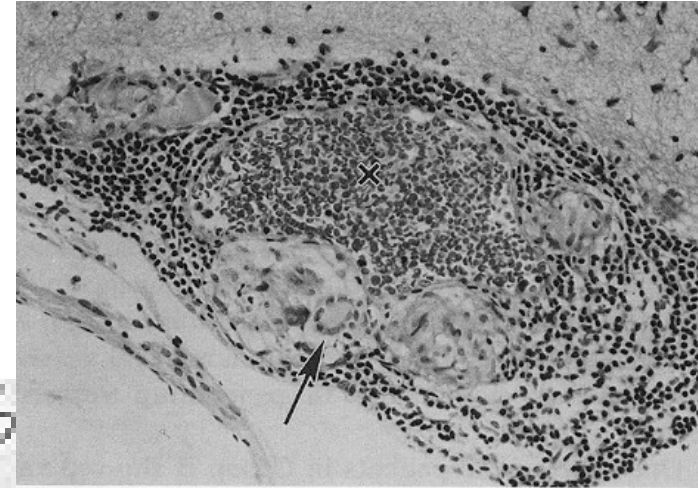
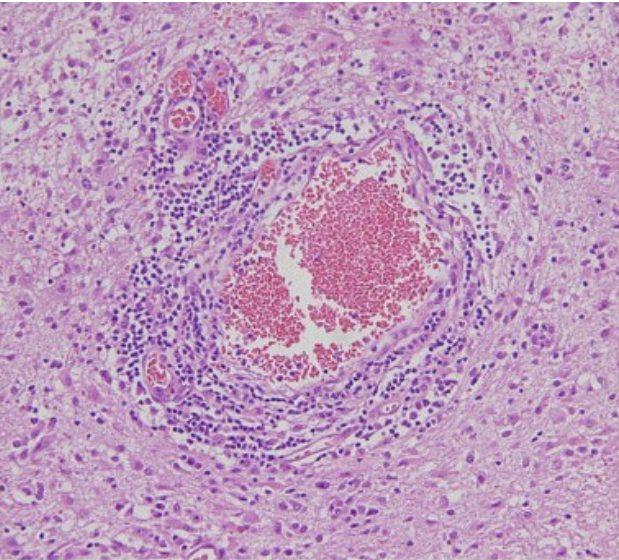
Diagnostic criteria for PACNS were proposed over 20 years ago by Calabrese et al

**Table 1**

Diagnostic criteria for PACNS.

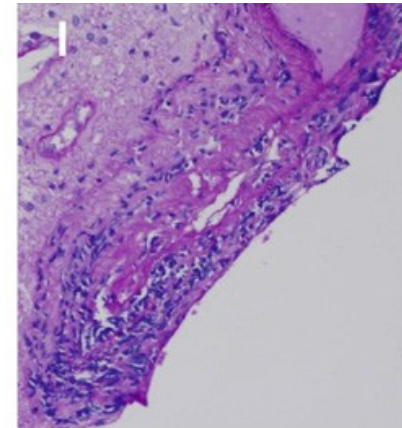
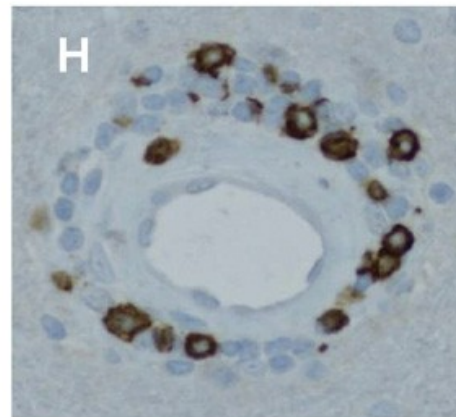
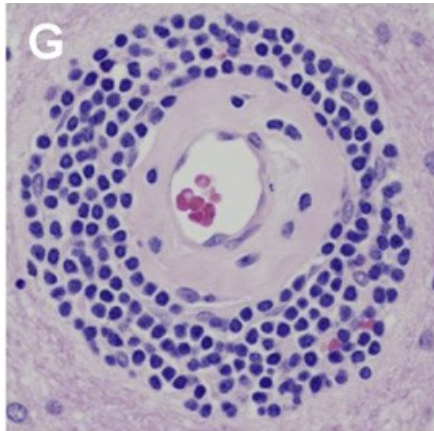
- 
1. The presence of an acquired otherwise unexplained neurological or psychiatric deficit.
  2. The presence of either classic angiographic or histopathological features of angiitis within the CNS.
  3. No evidence of systemic vasculitis or any disorder that could cause or mimic the angiographic or pathological features of the disease.
-

# Morphology



# Morphology---符合嗎?

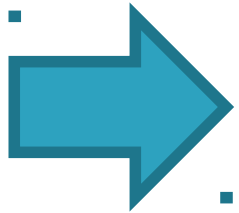
- ▶ Thickened vessel wall with perivascular lymphocytes
- ▶ Immunohistochemical stain for CD3 perivascular T-cell lymphocytes
- ▶ Vessel with rare foci of trans-mural fibrinoid necrosis and perivascular lymphocytes



Salvarani C, Brown Jr RD, Calamia KT, Christianson TJ, Weigand SD, Miller DV, et al. Primary central nervous system vasculitis: analysis of 101 patients. *Ann Neurol* 2007 Nov;62(5):442e51.

# Clinical feature

- ▶ 有神經表現嗎？
- ▶ 有系統免疫疾病？



- ▶ **Primary angiitis of the CNS**

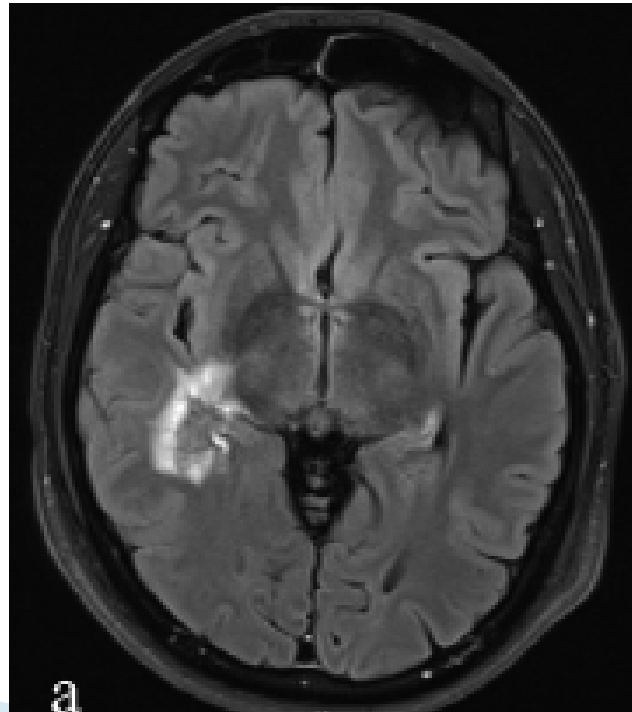


# Image ---- 符合嗎?

- ▶ Neuro-imaging in PACNS reveals **ischemic infarctions** as the most common lesions, occurring in 53% of cases. Infarcts are often multiple, bilateral, affecting different vascular territories of variable size, and in various stages of healing
- ▶ high intensity lesions in the white matter demonstrated by T2-weighted magnetic resonance imaging (MRI) with a fluid-attenuated inversion-recovery sequence (T2WI/FLAIR) are very common

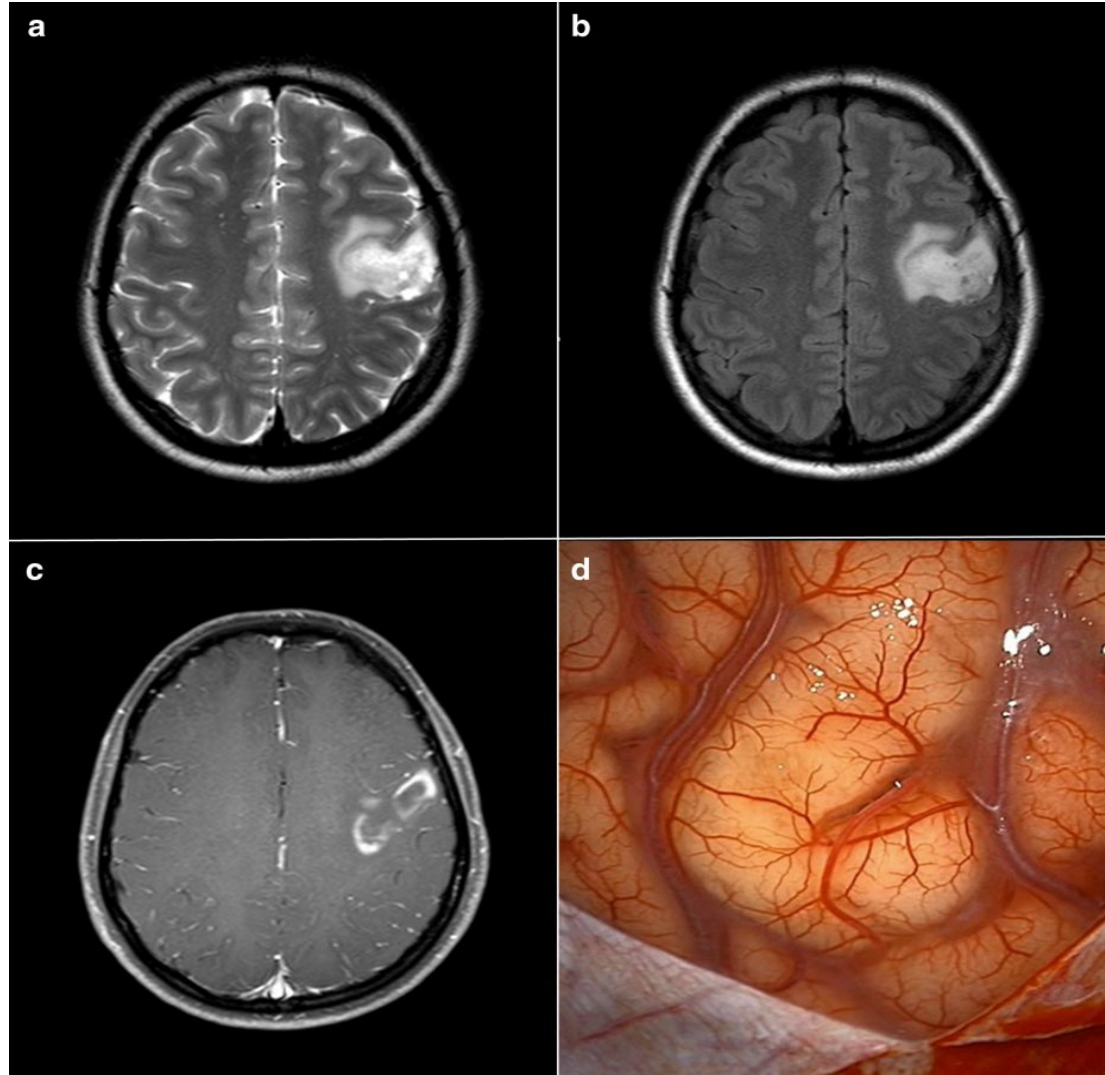


- ▶ Mass lesions, meningeal enhancement and intracranial hemorrhages can be seen in 5%, 8% and 9% of cases, respectively



## Figure 1

(a) T2-weighted MRI shows high signal intense lesion in the left frontal lobe, (b) which is also hyperintense on FLAIR and (c) the lesion shows enhancement in the peripheral area of the lesion on contrast-enhanced T1-weighted MRI. (d) Intraoperatively, the premotor cortex harboring the tumor looks pale, present in the cerebral parenchyma without dural involvement. However, overlying leptomeninges were involved.



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