A 42-year-old man with a history of benign incidental dorsal trauma 5 years earlier presented with progressive weakness of the right leg for 2 years. Clinical examination revealed decreased left-sided pain, temperature, and light touch sensation below the level of T2, right leg weakness, normal proprioception, and increased deep tendon reflexes in the right leg, in absence of bladder dysfunction. Spinal MRI showed herniation of the ventral spinal cord to the left at level T1 (figure). A diagnosis of transdural spinal cord herniation (TSCH) was made. TSCH is a rare cause of progressive myelopathy. TSCH is reported after spinal trauma or herniated disc surgery.1 Spontaneous cases are also described.2 Patients usually present with a Brown-Séquard–like syndrome or progressive paraparesis.


Giovanni Castelnovo, MD, Jean Pierre Hladky, MD, Dimitri Renard, MD

From CHU Nîmes (G.C., D.R.), Hôpital Caremeau; and Clinique des Franciscaines 3 (J.P.H.), Nîmes, France.

Author contributions: Giovanni Castelnovo: drafting/revising the manuscript, study concept or design, analysis or interpretation of data, accepts responsibility for conduct of research and final approval, acquisition of data, study supervision. Jean Pierre Hladky: drafting/revising the manuscript, study concept or design, analysis or interpretation of data, accepts responsibility for conduct of research and final approval. Dimitri Renard: drafting/revising the manuscript, study concept or design, analysis or interpretation of data, accepts responsibility for conduct of research and final approval.

Study funding: No targeted funding reported.

Disclosure: The authors report no disclosures relevant to the manuscript. Go to Neurology.org for full disclosures.

Correspondence to Dr. Castelnovo: giovanni.castelnovo@chu-nimes.fr
Spontaneous transdural spinal cord herniation
Giovanni Castelnovo, Jean Pierre Hladky and Dimitri Renard
Neurology 2014;82;1290
DOI 10.1212/WNL.0000000000000286

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