Bilateral frontal cysts from a crista galli meningioma

A 73-year-old woman had progressive apathy, forgetfulness, and gait disturbance for 6 months. Neurologic examination showed inattentiveness, memory impairment, and broad-based gait. Noncontrast MRI was performed due to gadolinium allergy. MRI and contrast-enhanced CT scan revealed symmetric bilateral frontal cysts (figure 1A) and an anterior skull base nodule (figure 1, B and C). Surgery confirmed a meningioma arising from the crista galli (figure 2A). Her symptoms improved postoperatively and the cysts shrank significantly (figure 2B).

Figure 1 Symmetric bilateral frontal cysts and a tumor on MRI and CT

(A) Axial and (B) coronal T2-weighted MRI show large symmetric bilateral frontal cysts and an isointense nodule (arrow) over the cribriform plate. (C) Contrast-enhanced CT scan shows that the nodule is homogenously enhanced (arrow). The differential diagnosis includes meningioma, esthesioneuroblastoma, and hemangiopericytoma.

Figure 2 Surgical view and postoperative MRI

(A) A bifrontal approach reveals the cyst wall (arrowheads) and a meningioma (arrow) arising from the dura of the crista galli (open arrowheads). The dashed line indicates the midline. (B) The T2-weighted MRI 4 months after the surgery demonstrates shrinkage of the cysts.
Cystic meningiomas are classified as intratumoral, intraparenchymal, and subarachnoidal/epiarachnoidal
types. Cysts that are occasionally observed in skull base meningiomas are usually unilateral; symmetric
bilateral cysts are rare.

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