



2025

KARNATAKA RADIOLOGY EDUCATION PROGRAM

CEREBELLAR LESION

FROM - Department of Radiodiagnosis , KMCRI
Hubli

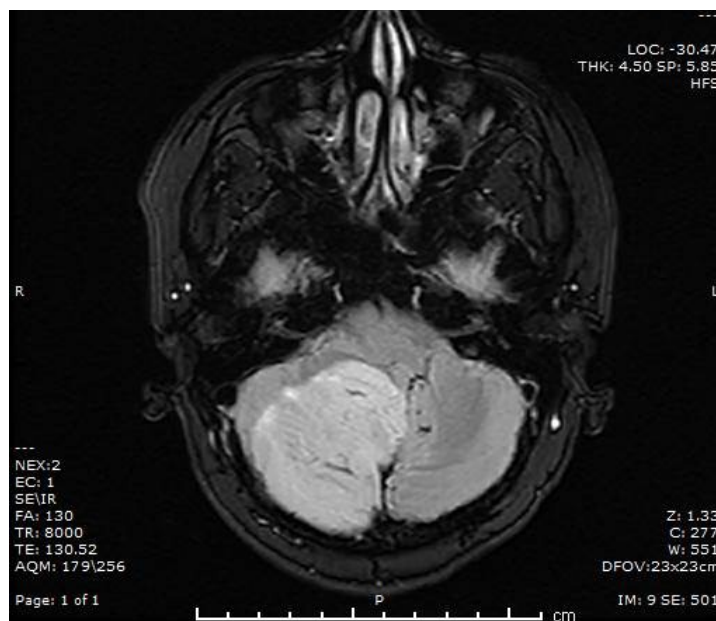
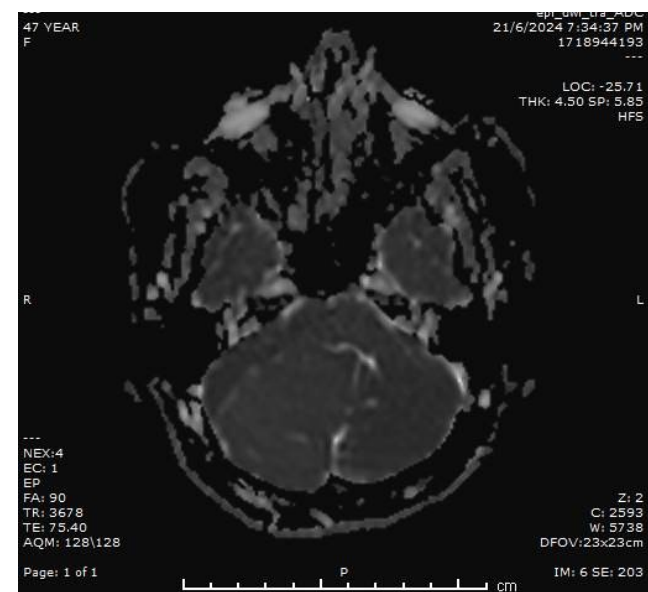
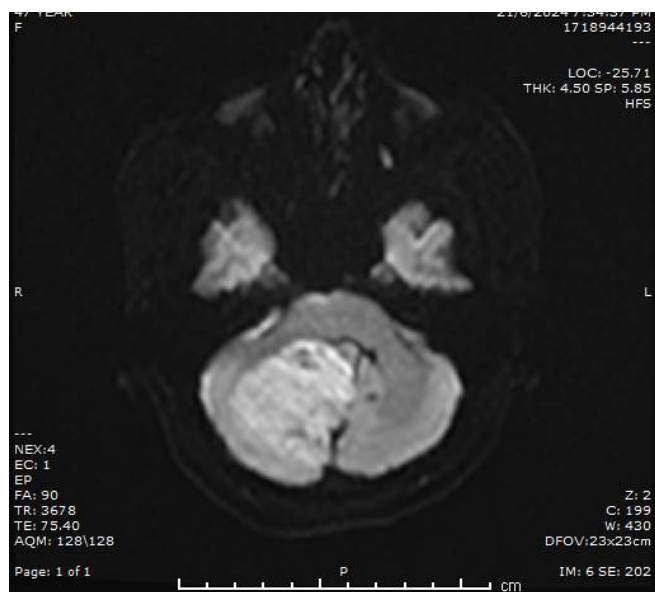
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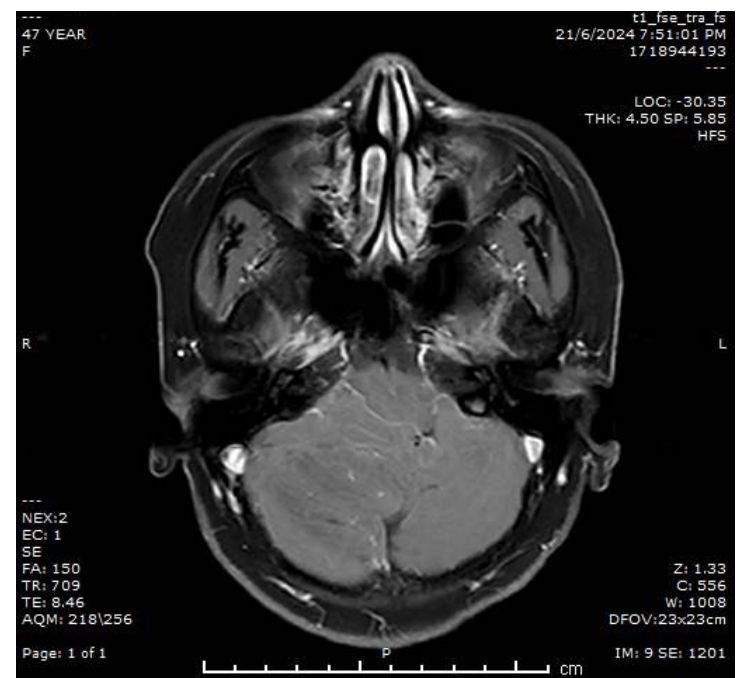
HISTORY

- 47 year old female patient came with complaints of giddiness and headache since 2 months , patient was advised MRI brain with contrast

MRI







MRI FINDINGS

well defined T1 hypointense, T2/FLAIR hyperintense lesion in Right cerebellar hemisphere extending into vermis and cerebellar tonsils. It is protruding into the foramen magnum with effacement of 4th ventricle with dilatation of 3rd and bilateral lateral ventricles with periventricular CSF seepage .The lesion is hyperintense on T2 with typical striated folial pattern. Post contrast study shows no obvious enhancement. The lesion shows T2 shine through on DWI .

FINAL DIAGNOSIS - LHERMITTE DUCLOS DISEASE
(DYSPLASTIC GANGLIOCYTOMA OF CEREBELLUM)

THANK YOU