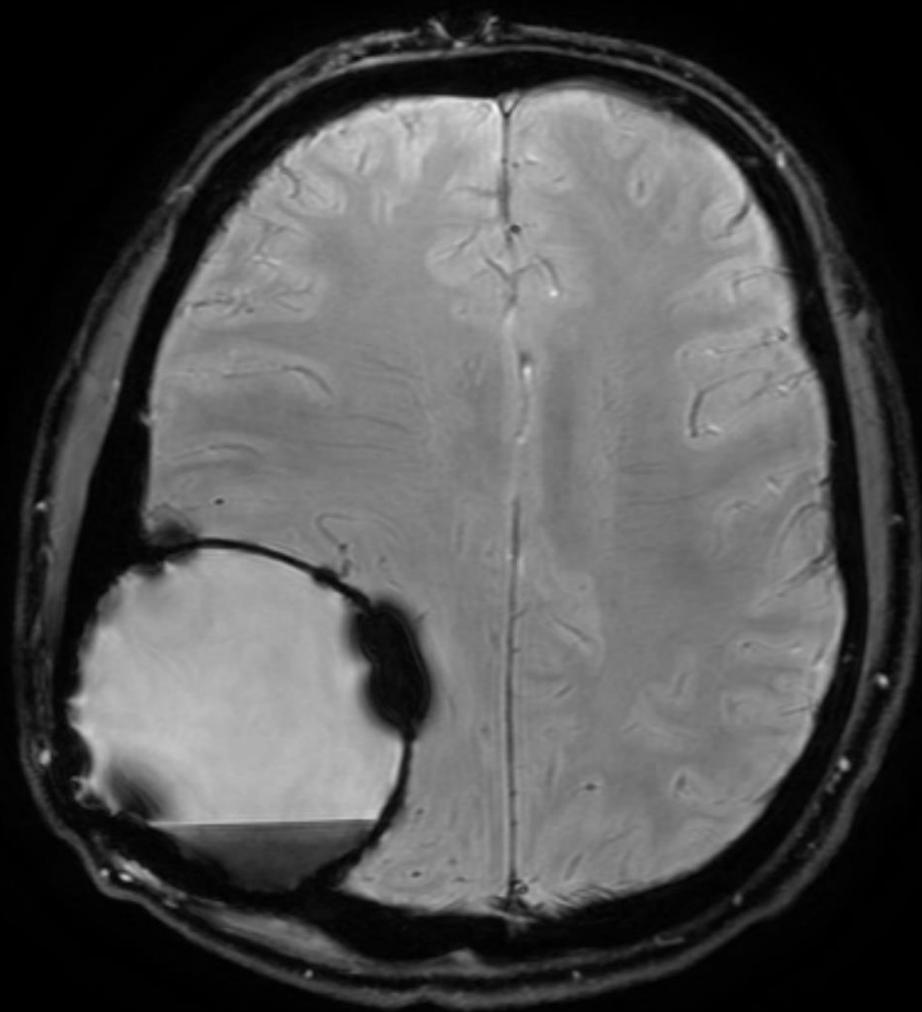
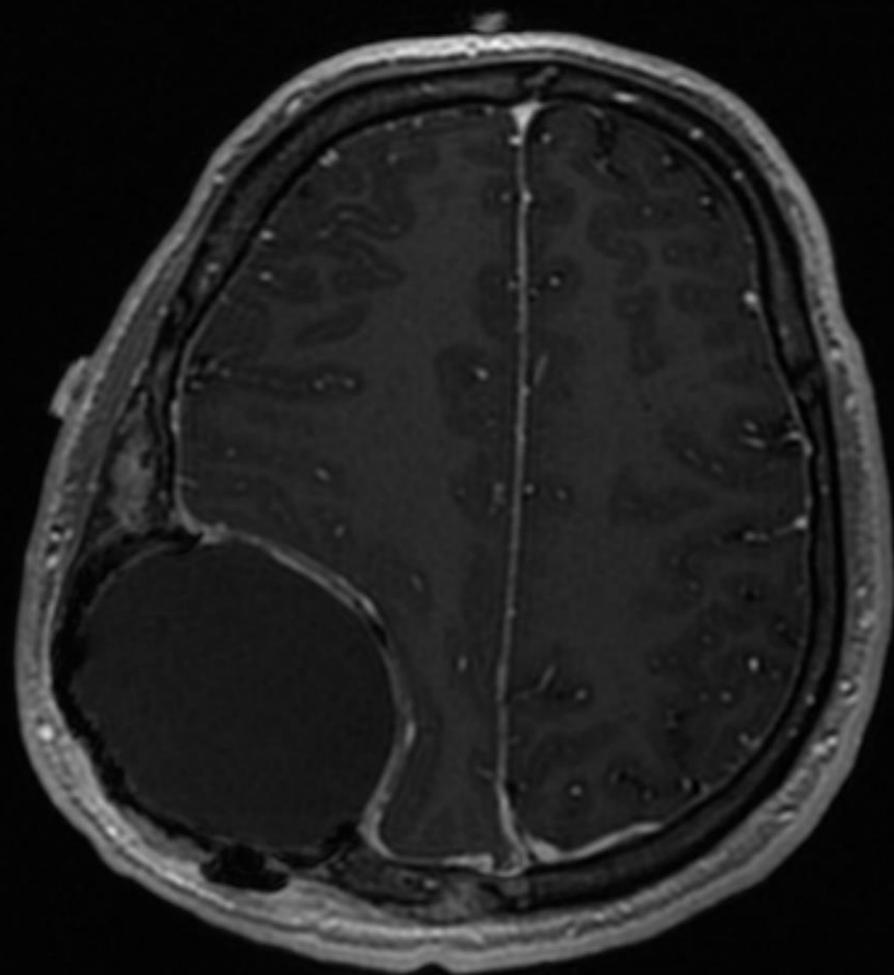


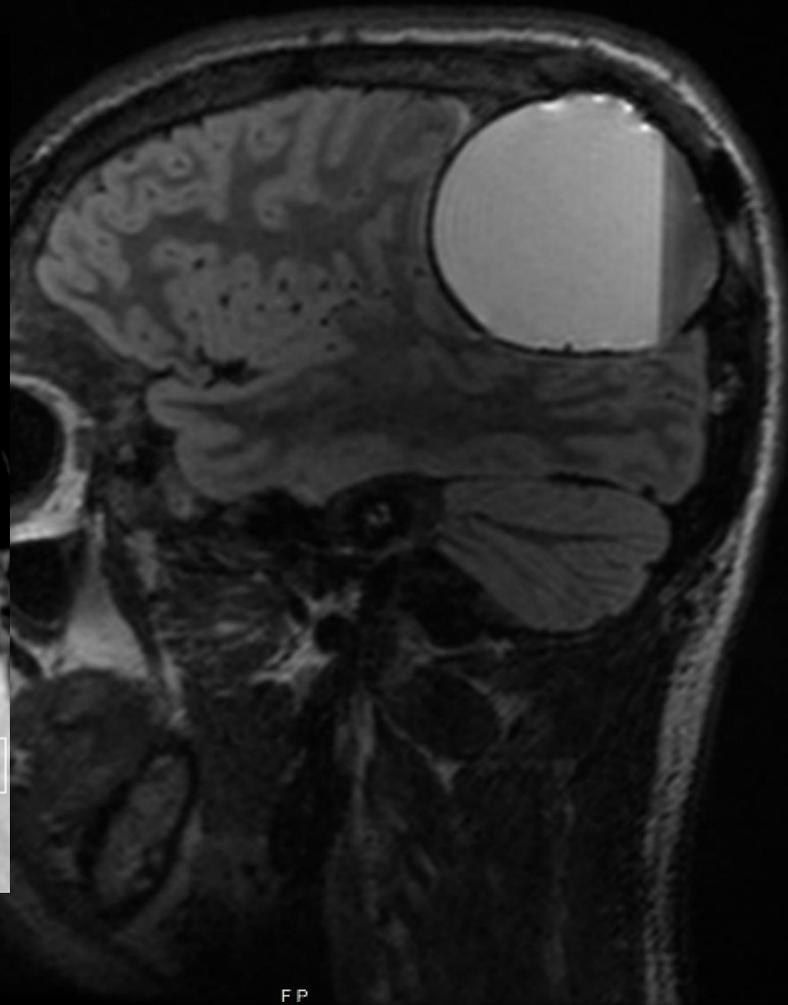


21 yr old man with decreased concentration and math skills

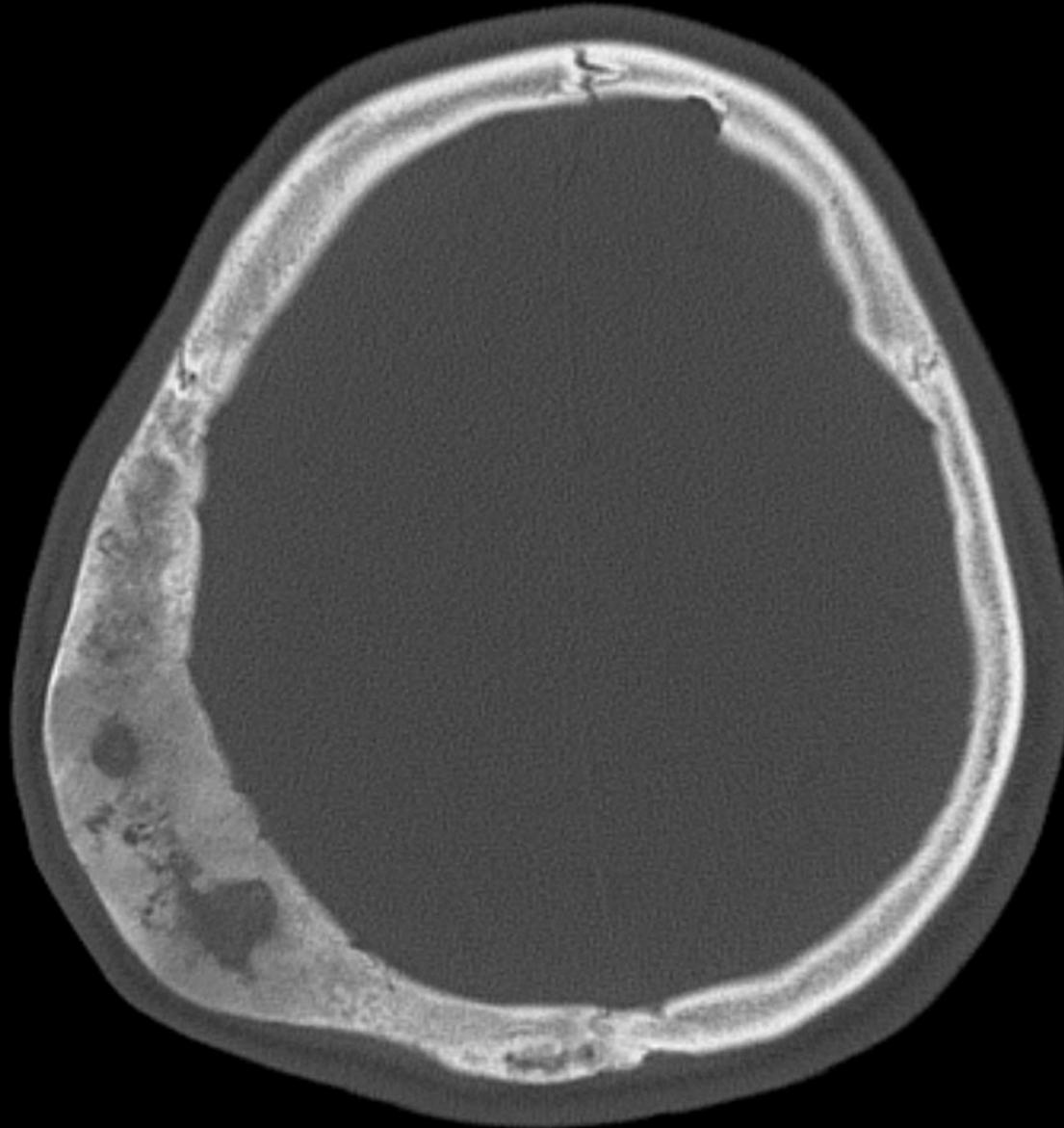
Valentin Lance

3/18/16





2 years earlier



Fibrous Dysplasia with Secondary Aneurysmal Bone Cyst

- Extremely rare to have both lesions present as a solitary calvarial lesion
- 9 case reports in the literature

Table 1. Summary of published cases of fibrous dysplasia in combination with aneurysmal bone cyst presenting with solitary lesion of calvarium

Author/Year	Sex/age	Symptom	Duration of symptom	Location	CT findings
Branch CL, 1986	F/9	Expanding painful mass / Painless mass	1 month / 2 years	Parietal / Frontotemporal	Large area of bone lysis with erosion of the inner and outer tables and expansion of the diploic space
Branch CL, 1986	M/19	Painless mass	4 weeks	Parietal	Cystic expansion of the skull and soft tissue mass with an abnormal rim of contrast enhancement
Rappaport ZH, 1989	M/25	Painless mass	Unknown	Occipital	Intradiploic hypodense lesion
Wojno KJ, 1994	F/14	Painless mass	Unknown	Temporal	heterogeneous cystic lesion
Wojno KJ, 1994	M/40	Expanding mass	Unknown	Frontal	Diffuse thickening of the calvarium and cystic lesion with septation
Itshayek E, 2002	M/19	Expanding painless mass	Unknown	Occipital	Expanded diploic space with ground glass appearance
Lin WC, 2004	M/18	Expanding painful mass	2 weeks	Frontal	Cystic degeneration and multiple cavities with internal fluid-fluid level
Mattei TA, 2005	F/19	Headache, nuchal rigidity, Painless mass	Unknown	Occipital	Subarachnoid hemorrhage and diploic cyst with fluid-fluid level
Lee JW, 2010	F/18	Expanding painful mass	10 days	Frontoparietal	Osteolytic lesion and expansion of the diploic space

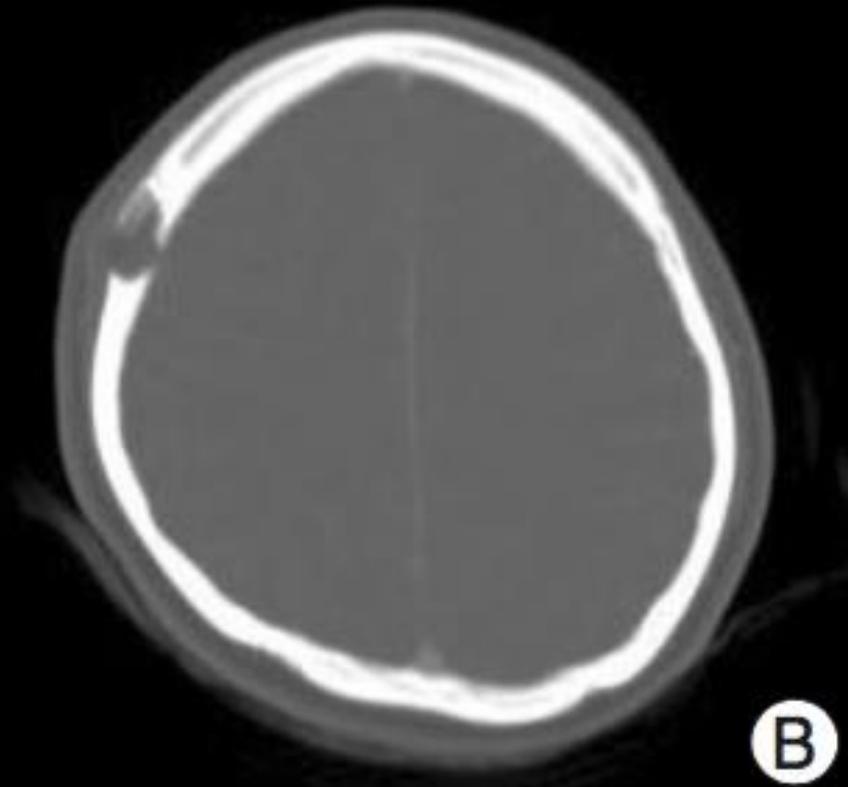
Fibrous Dysplasia with Aneurysmal Bone Cyst Presenting as Painful Solitary Skull lesion

Jung Won Lee, M.D.,¹ Jae Hoon Kim, M.D.,¹ Seung Hoon Han, M.D.,² Hee In Kang, M.D.¹

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Department of Rehabilitation,² Hanyang University Guri Hospital, Guri, Korea

- 18 year old F presented with painful scalp mass

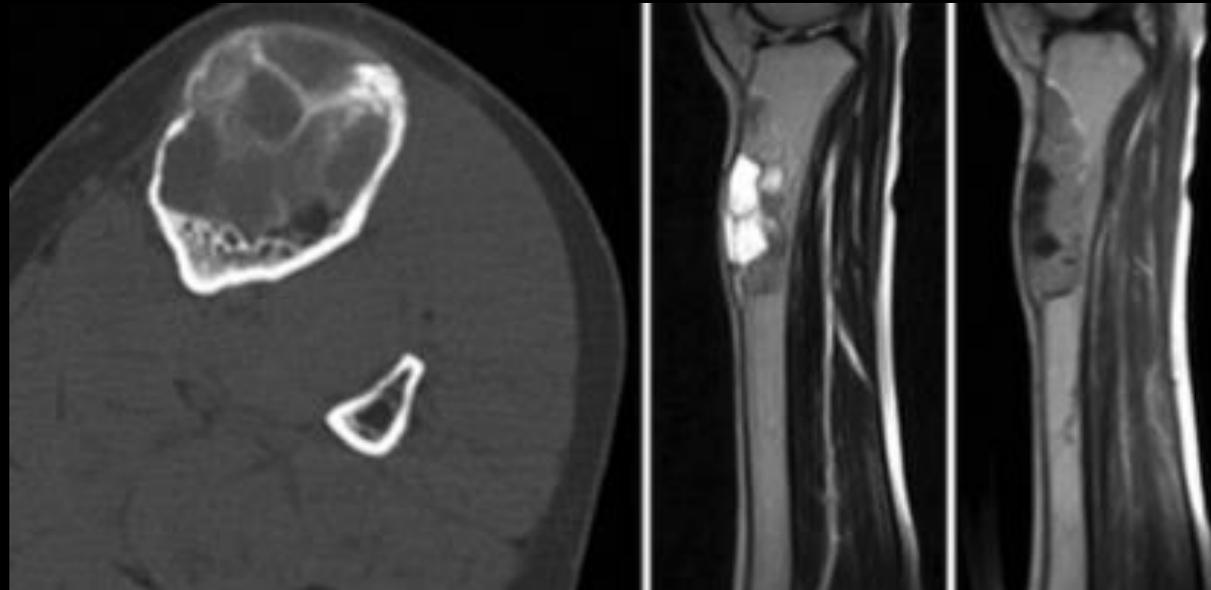


Polyostotic fibrous dysplasia with secondary aneurysmal bone cyst in tibia

Vandana L. Gaopande, Maithili M. Kulkarni, Deshmukh S. D, Varsha P. Rangankar¹

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- Also rare in the extremities
- Less common in association with polyostotic FD than monostotic FD



Pathophysiology

- Unknown
- Formation of ABC may arise from disruption of the osseous circulation from the primary lesion
- *Fluid levels in fibrous dysplasia may also form due to cystic degeneration, in the absence of secondary ABC formation

Differential of solitary osteolytic calvarial lesions

- Hemangioma
- Epidermoid cyst
- Eosinophilic granuloma
- Metastases
- Myeloma
- Lymphoma

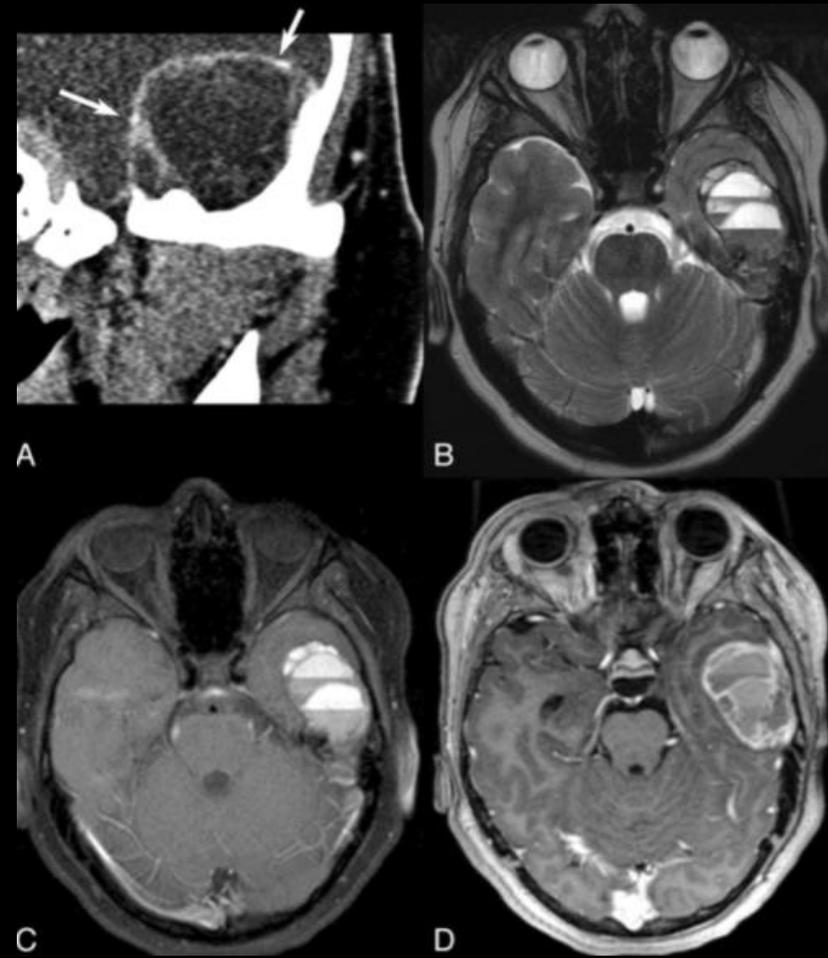
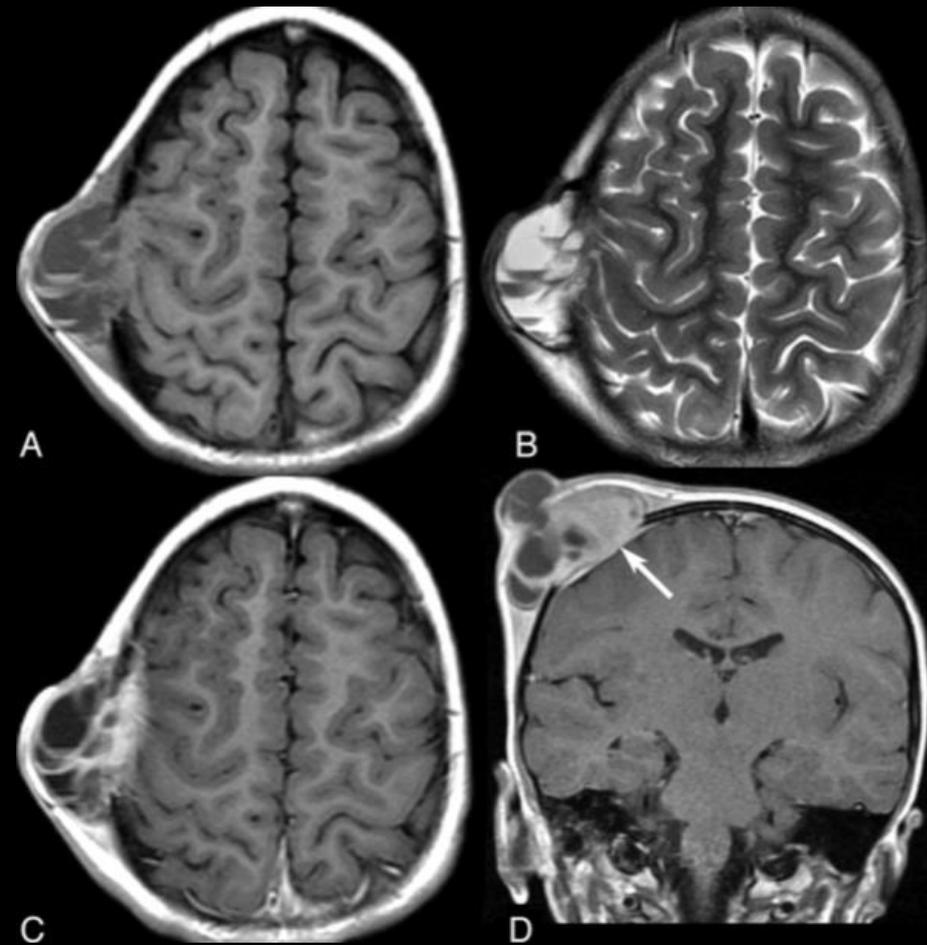
CT and MRI of Pediatric Skull Lesions with Fluid-Fluid Levels

S.A. Nabavizadeh, L.T. Bilaniuk, T. Feygin, K.V. Shekdar, R.A. Zimmerman, and A. Vossough

- Retrospective examination of 11 pediatric patients with fluid fluid levels in calvarial lesions
- Diagnoses (in decreasing order of frequency):
 - Langerhans cell histiocytosis
 - Aneurysmal Bone cyst
 - Cephalohematoma
 - Metastatic neuroblastoma

Langerhans Cell Histiocytosis

Aneurysmal Bone Cyst



Summary

- Secondary aneurysmal bone cyst formation from fibrous dysplasia is rare in the skull
- There are several differential diagnoses of calvarial fluid-fluid levels, which differ between the pediatric and adult population

References

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2. Faul S et al. MRI features of craniofacial fibrous dysplasia. *Orbit*. 1998;17(2):125-132
3. Gaopande VL et al. Polyostotic fibrous dysplasia with secondary aneurysmal bone cyst in tibia. *J Orthop Allied Sci*. 2015;3:19-21
4. Lee JW et al. Fibrous Dysplasia with Aneurysmal Bone Cyst Presenting as Painful Solitary Skull lesion. *J Korean Neurosurg Soc*. 2010;48:551-554
5. Nabavizadeh SA et al. CT and MRI of Pediatric Skull Lesions with Fluid-Fluid Levels. *Am J Neuroradiol*. 2014:1-6