

Case 1995-7

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Case reference number: (A) S-13931-94; (B) S-2205-94

Clinical History

This 28 year-old bisexual hispanic man with a history of cocaine, alcohol and cigarette abuse tested positive for HIV in 1989. In 1993, he developed *Pneumocystis carinii* pneumonia and several skin lesions of the right chest wall were biopsied and diagnosed as "dermatofibroma" (11/93) and "spindle cell neoplasm with vascular proliferation" (10/94). On 11/18/94, he was admitted to Cook County Hospital because of difficulty of walking which was preceded by weakness of the his left hand, then right arm and neck five months before.

Magnetic resonance imaging of the cervical spine showed a mass impinging on the spinal cord at C5-T1. Emergency cervical laminectomy on 11/20/94 revealed an elongated extradural tan tumor loosely adherent to the dura at the level of the C6 and C7 vertebra. The tumor was completely removed. No attachment to the nerve root was observed. Irregular, tan red soft tissue measuring 2.5 x 1.5 x 0.7 cm was submitted for examination.

Submitted: Two hematoxylin and eosin slides from epidural mass (A) and skin (B).

Points for discussion:

- 1. Diagnosis**
- 2. Etiopathogenesis**