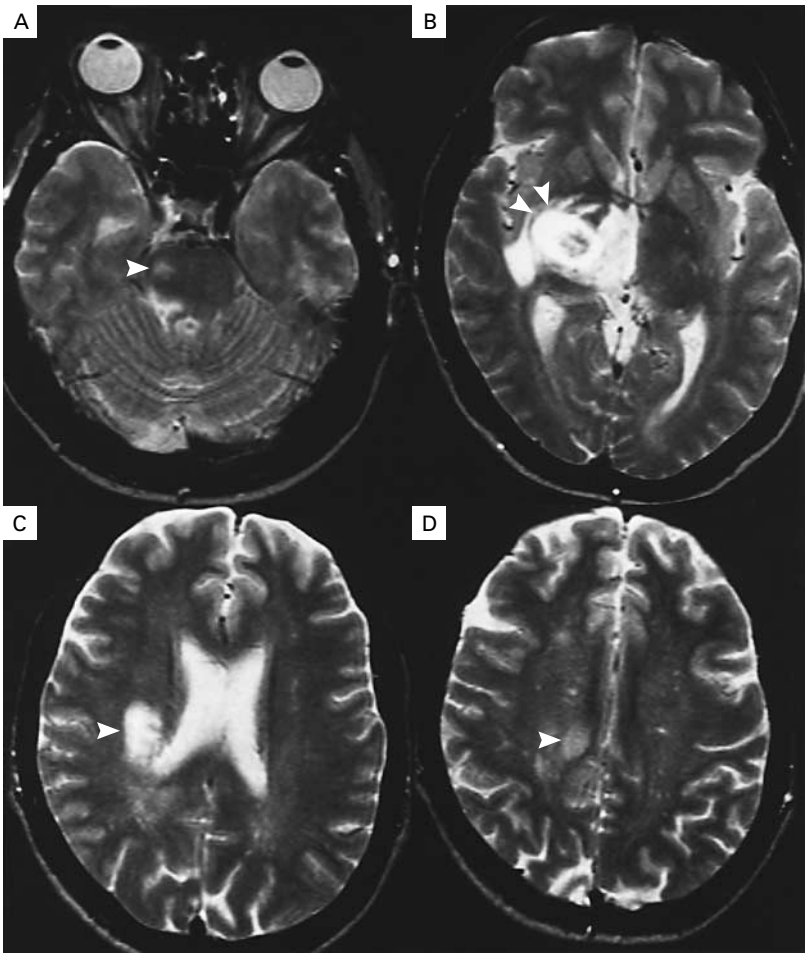
Images in Clinical Medicine



Astrocytoma Following the Pyramidal Tract

A 57-year-old man presented with a moderate left-sided hemiparesis. T_1-weighted magnetic resonance images with gadolinium revealed a contrast-enhanced lesion in the internal capsule and the adjacent basal ganglia. Stereotactic biopsy revealed the tumor to be a high-grade astrocytoma. Consecutive axial T_2-weighted magnetic resonance images demonstrate the tumor (pair of arrowheads in Panel B) in the internal capsule and the adjacent basal ganglia. In addition, a hyperintense signal shows that the pyramidal tract was affected from the pons to the corona radiata (single arrowheads in Panels A, C, and D). Because isolated malignant cells occur throughout the T_2-hyperintense regions adjacent to high-grade gliomas, complete resection is often impossible. The man was treated with both chemotherapy and radiation. Despite aggressive treatment, the tumor progressed, there was increasing hemiparesis, and the patient died.

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