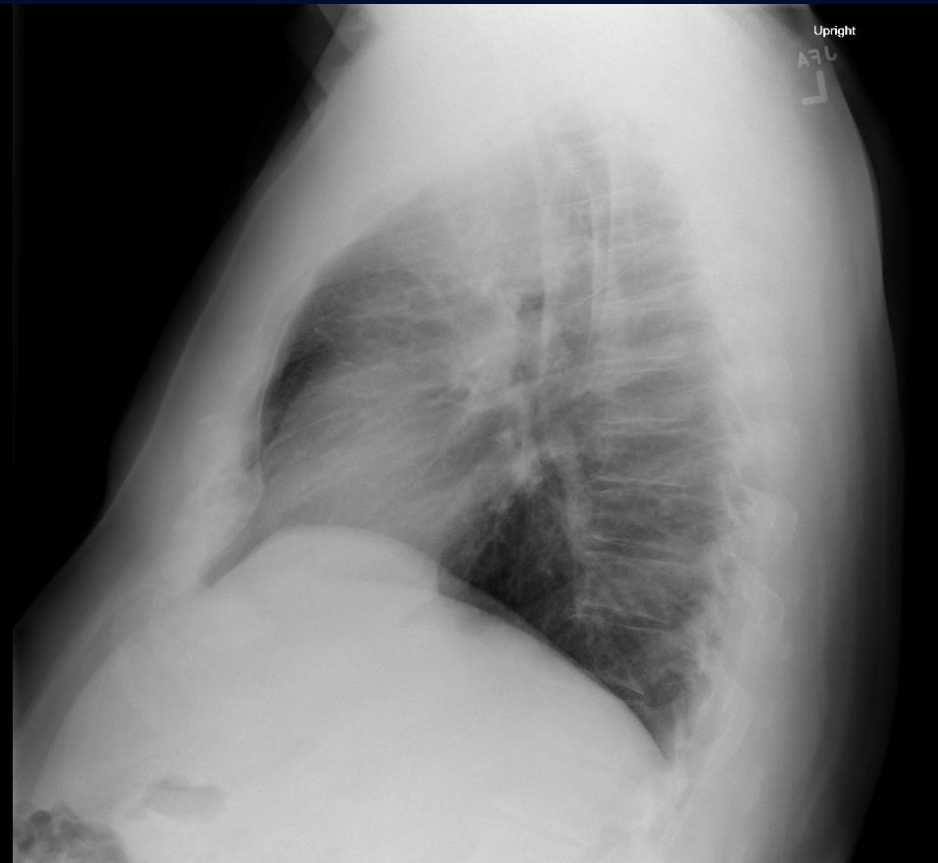


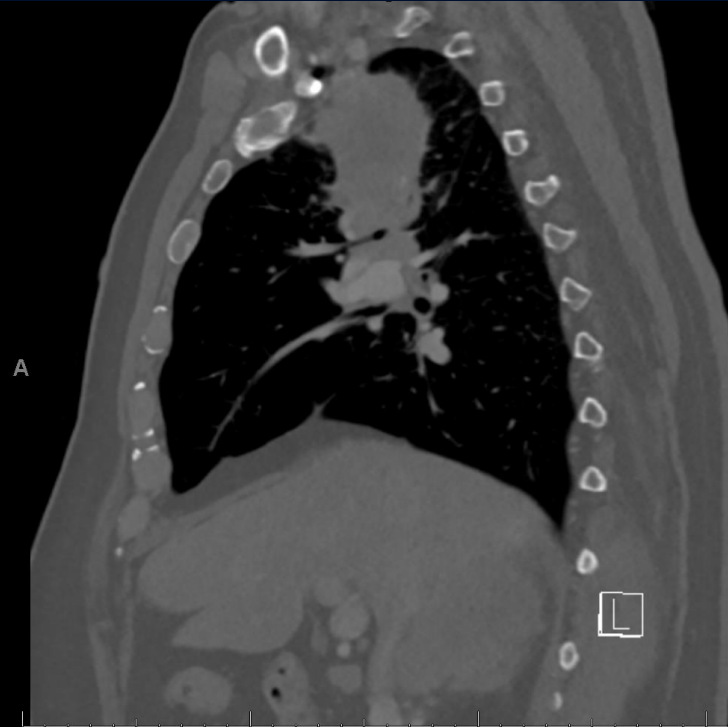
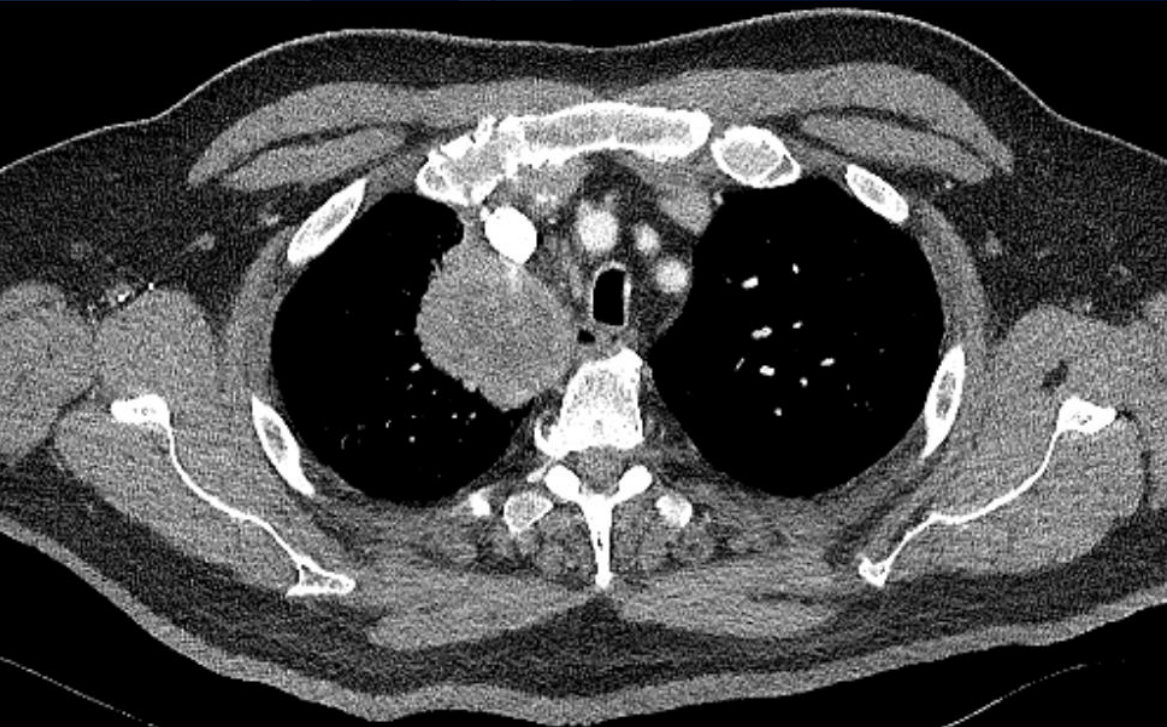
69-year-old male with 2-month history of intermittent left lower extremity weakness

Fabrizio Tropea, MS3

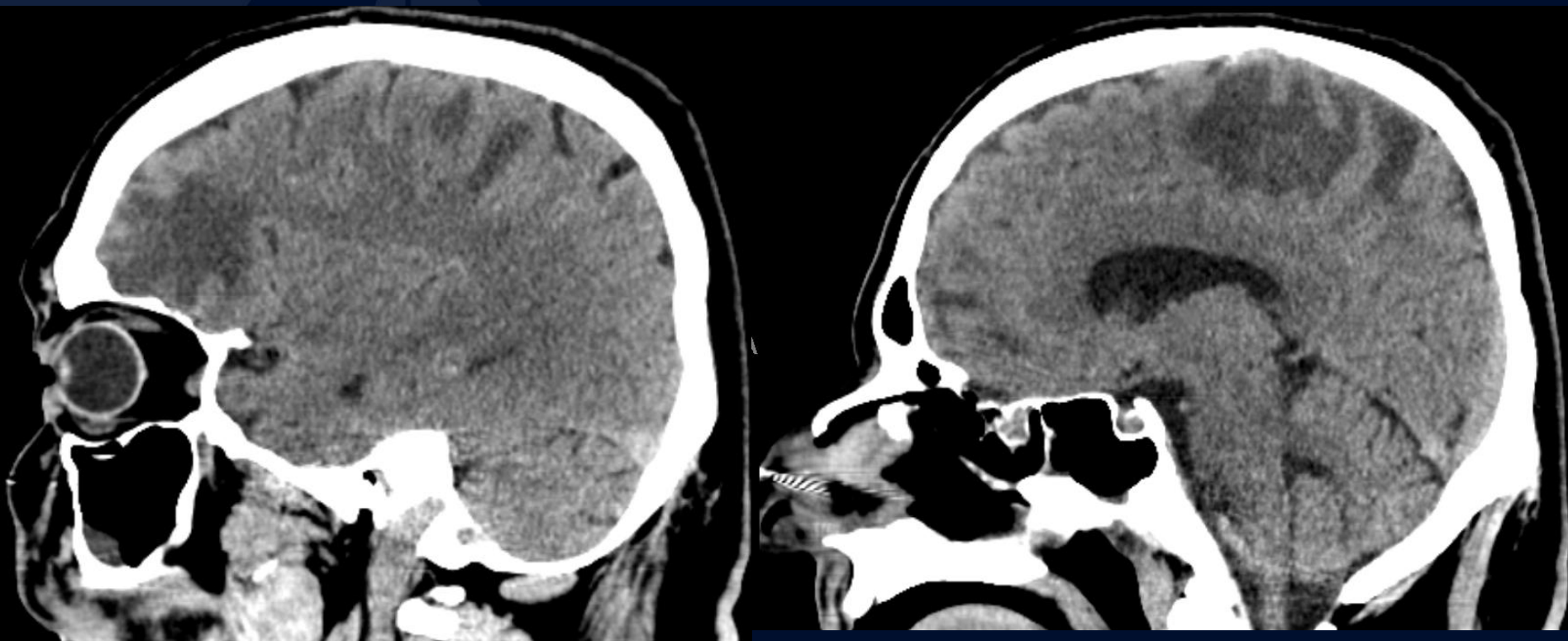
Radiographs



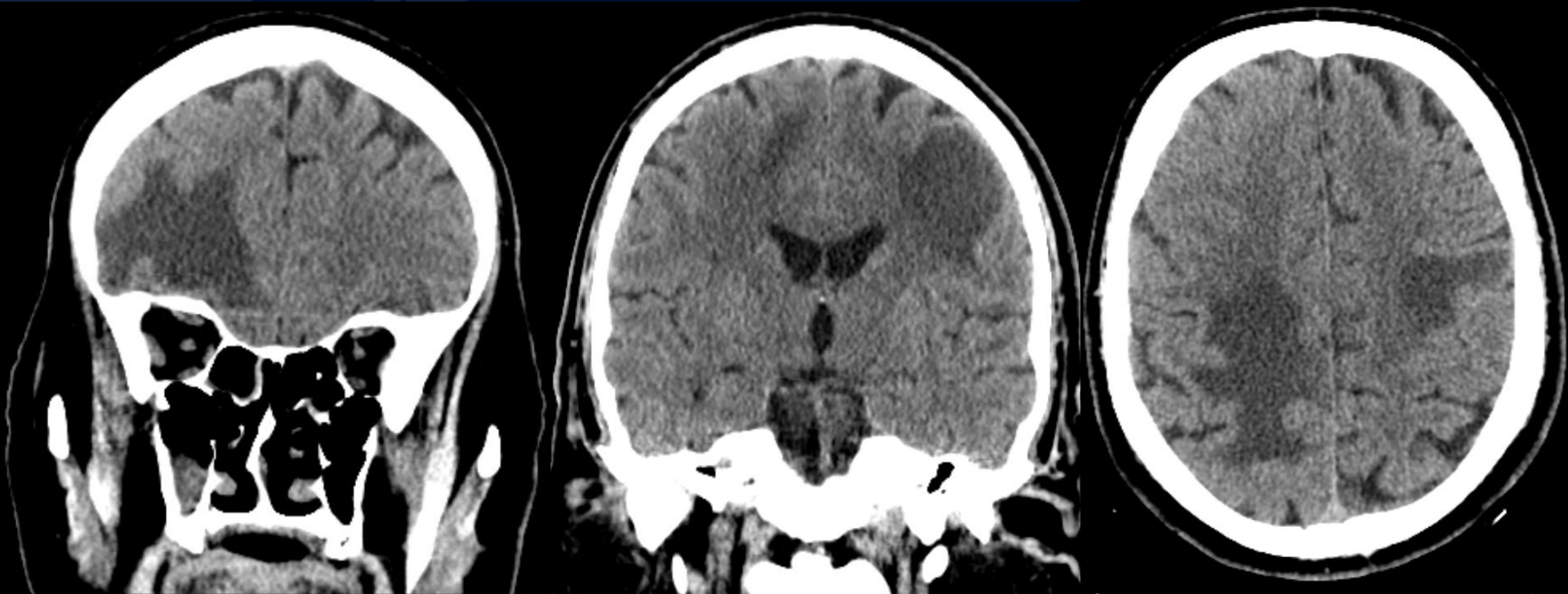
CT IV Contrast



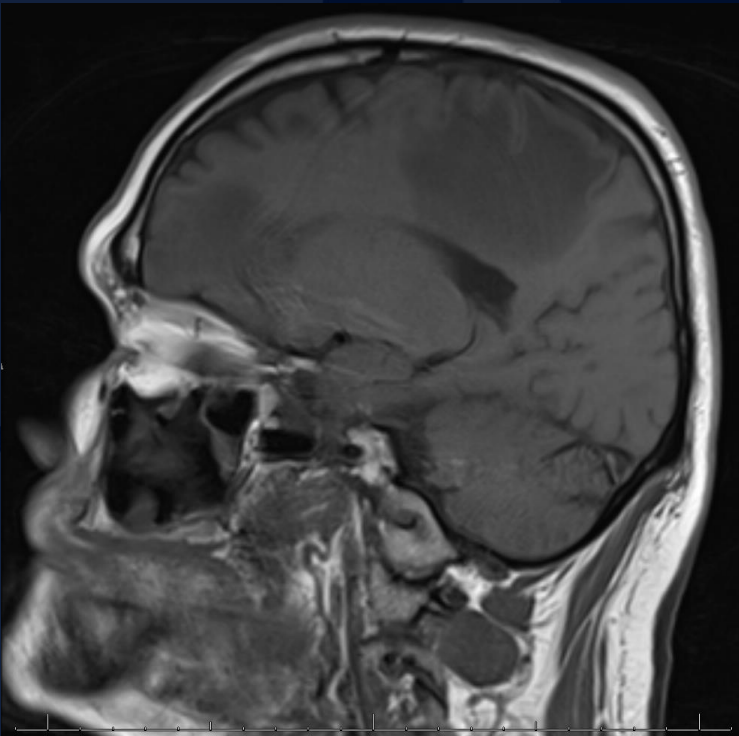
Non-contrast CT



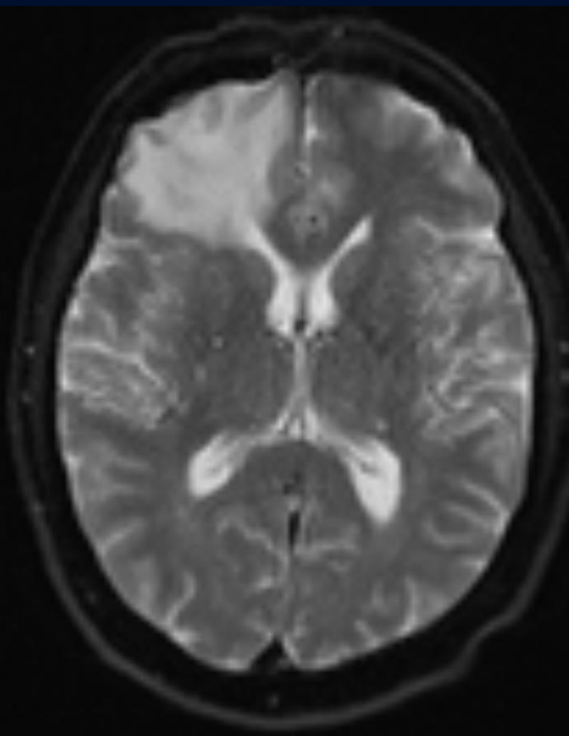
Non-contrast CT



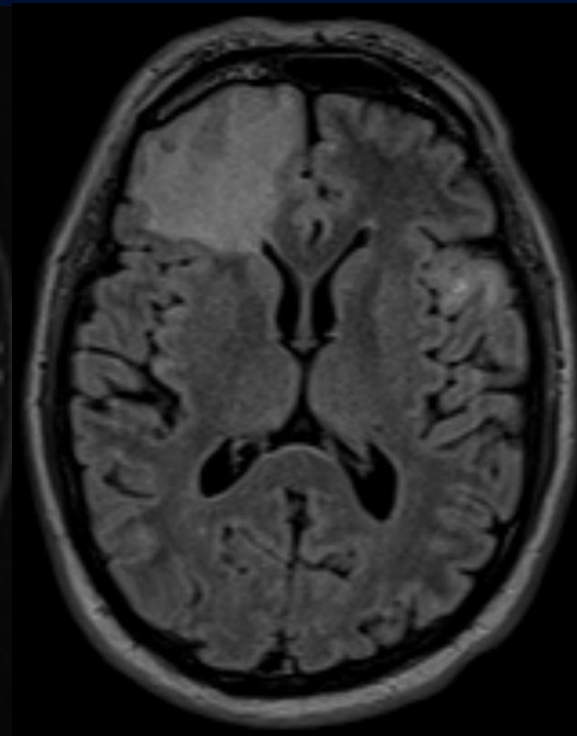
Sagittal T2



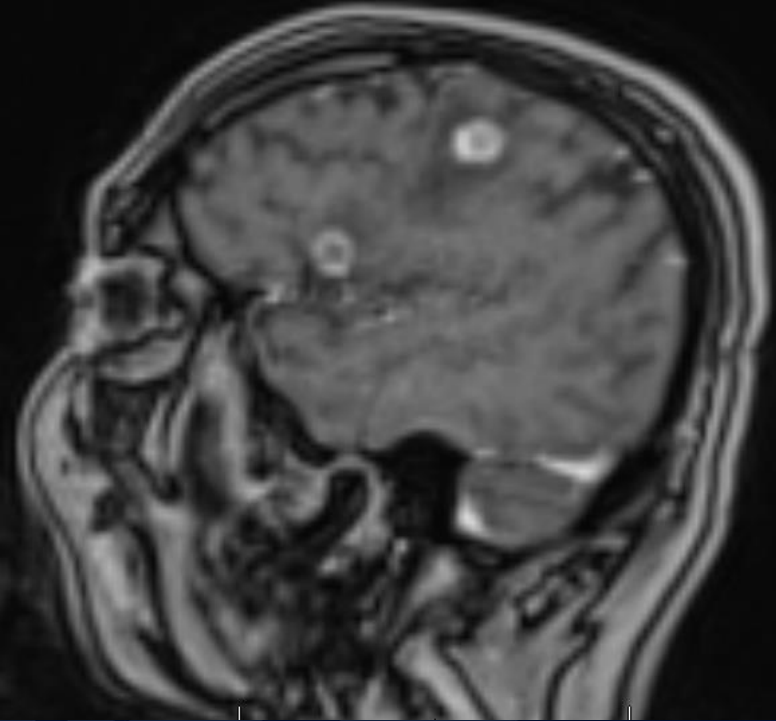
Axial T2 FS



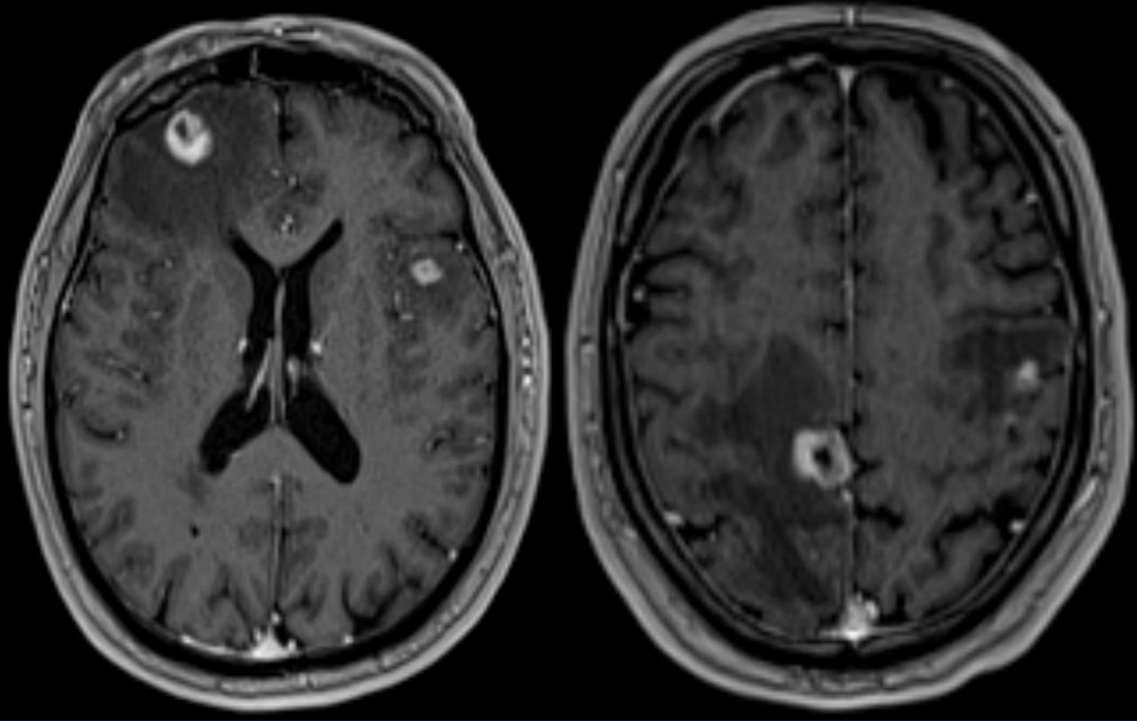
Axial T2 FLAIR



Sagittal T1 Post-contrast



Axial T1 Post-contrast

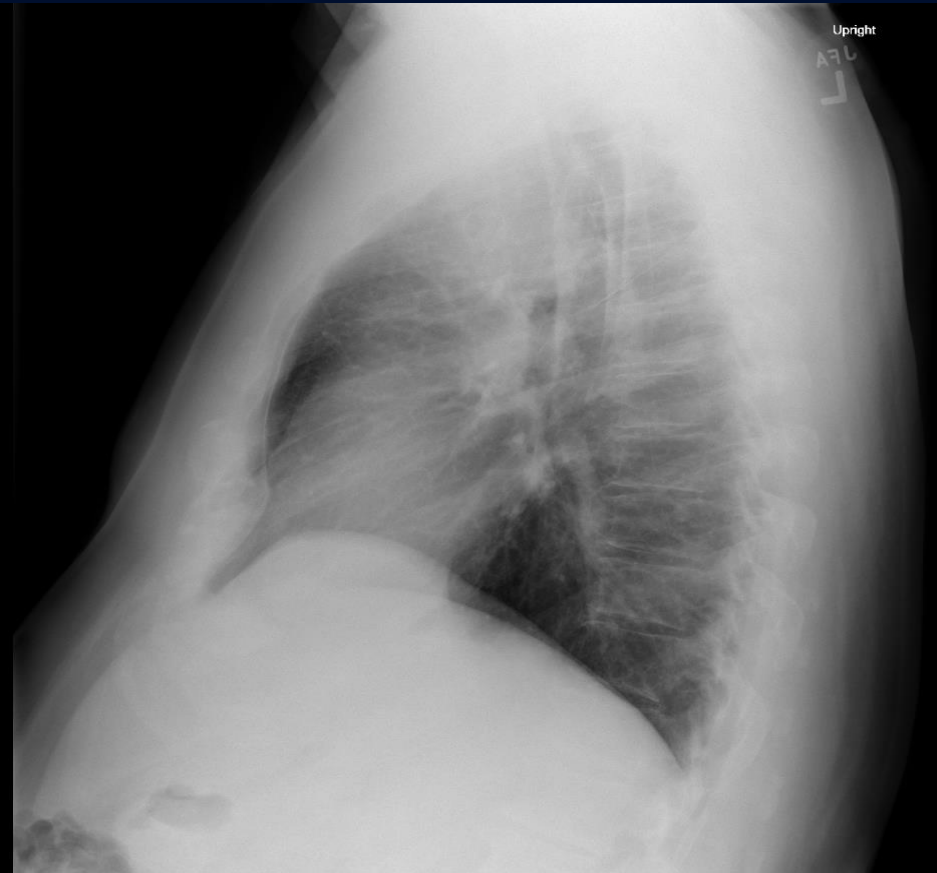
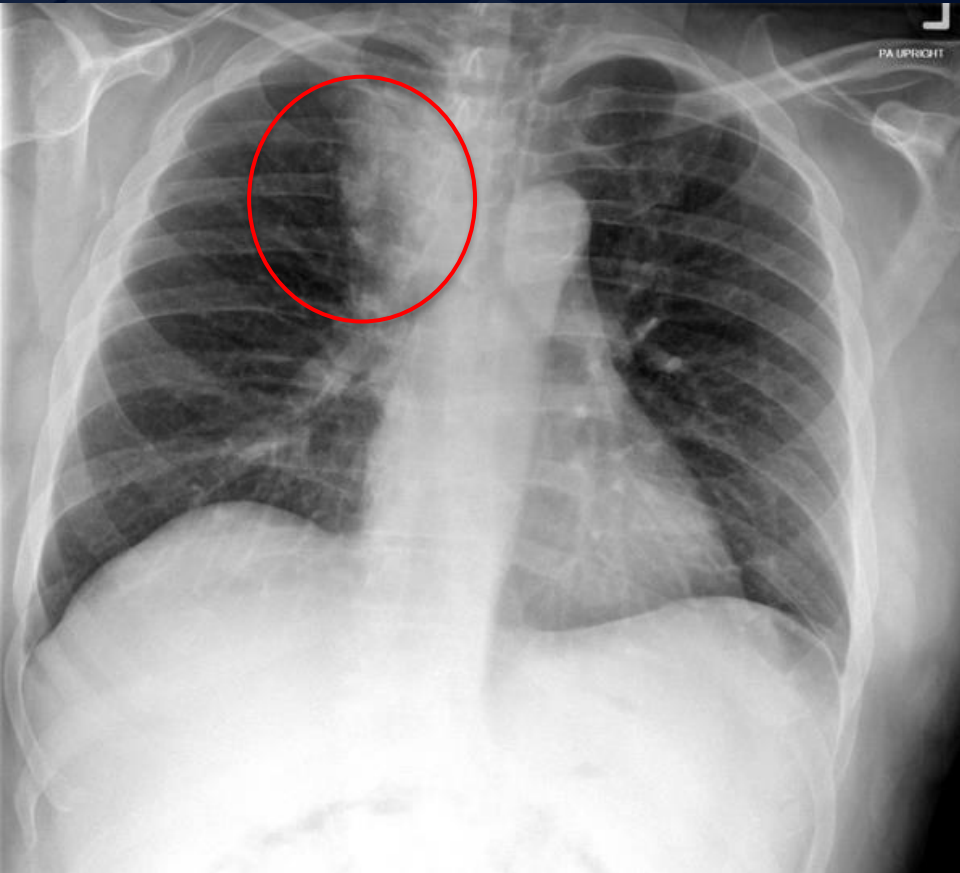




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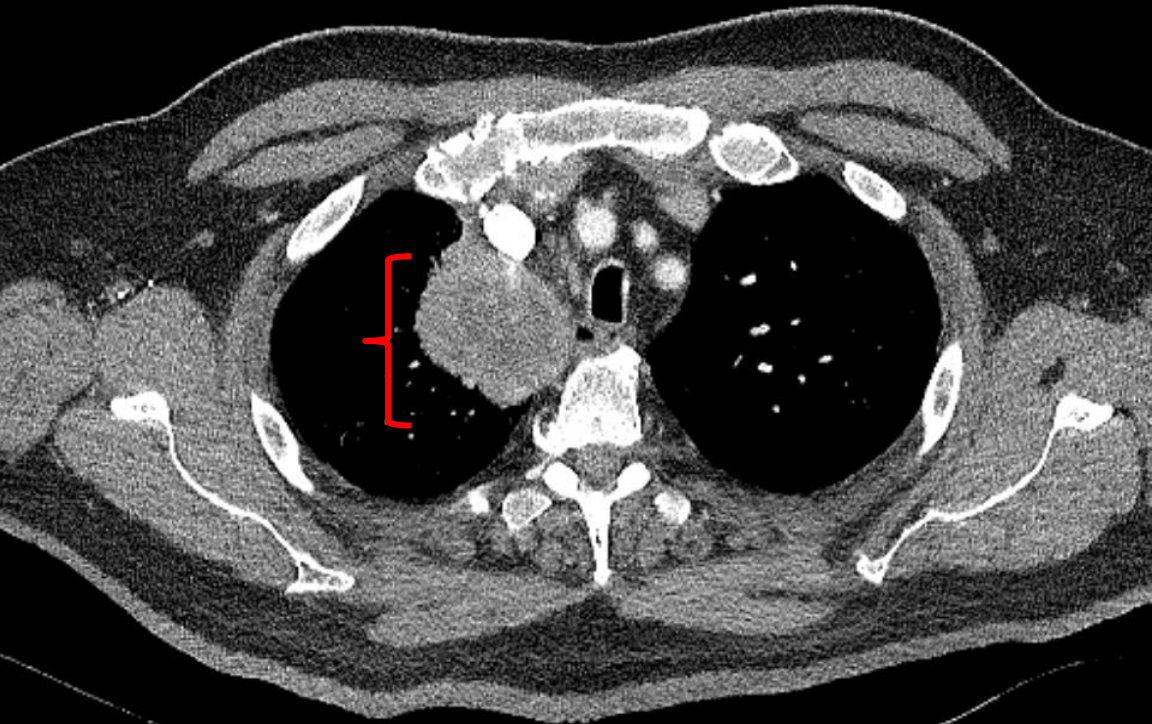
Metastatic Lung Cancer

Radiographs

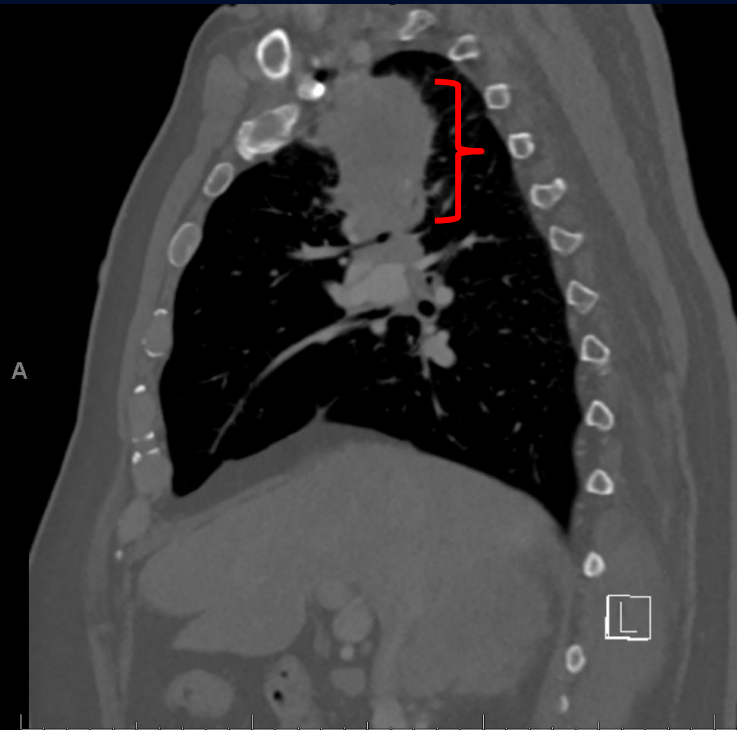


Right upper lobe opacity along the
right paratracheal stripe

CT IV Contrast



Right upper lobe soft tissue mass
abutting the upper mediastinum



Irregular right upper lobe soft tissue
mass with spiculated borders

Non-contrast CT

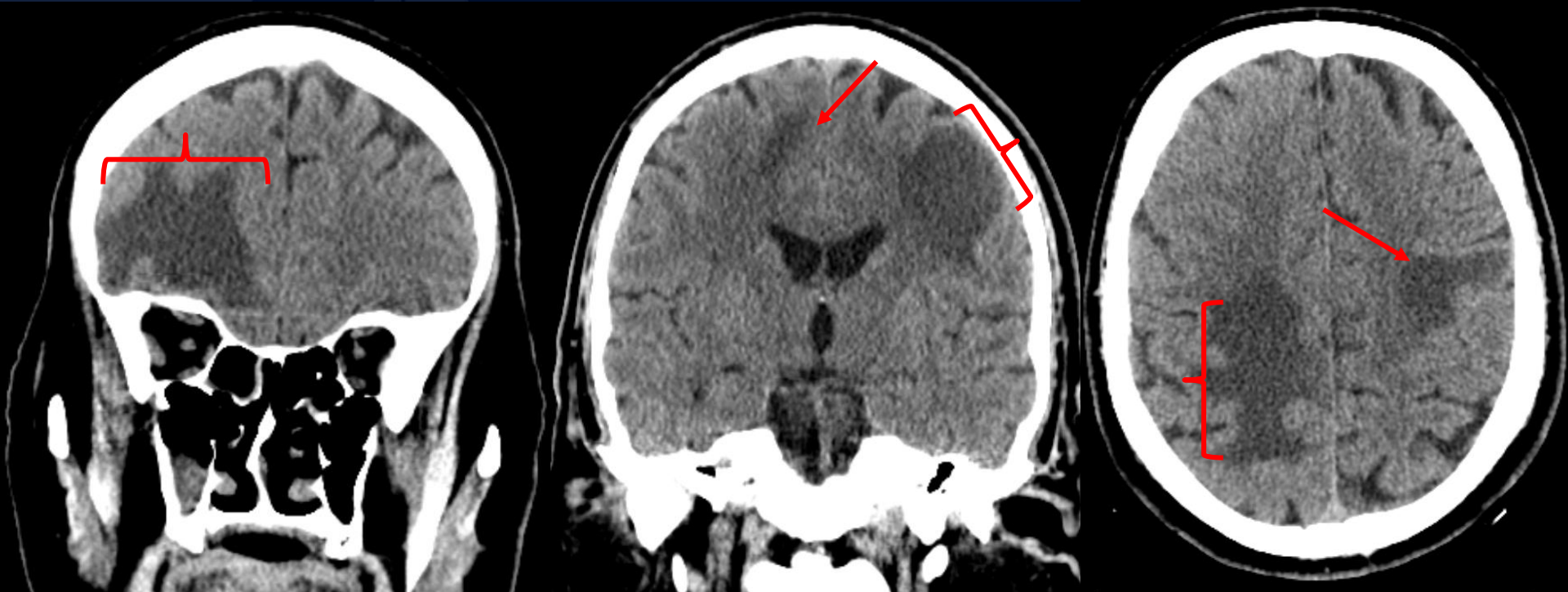


Vasogenic edema



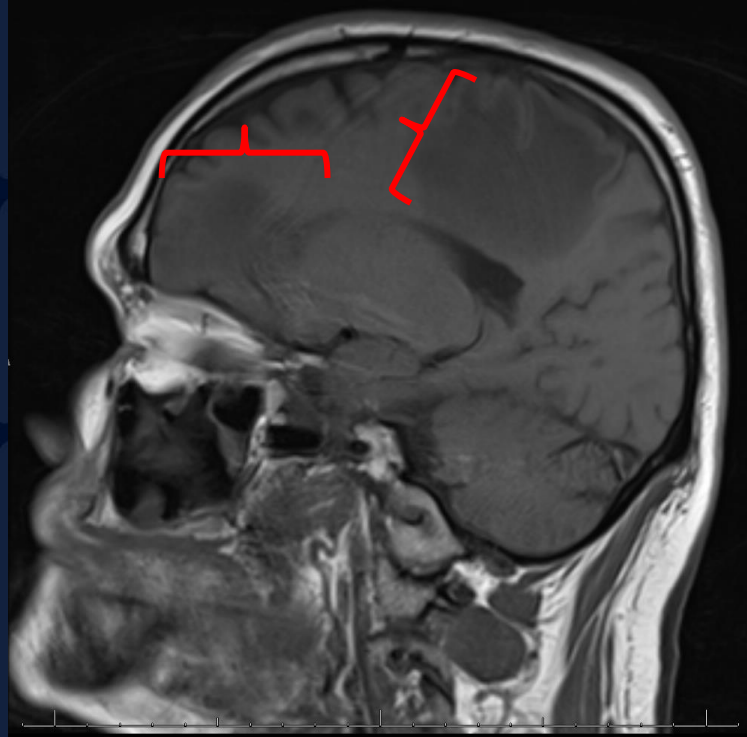
Soft tissue lesion with
surrounding vasogenic edema

Non-contrast CT

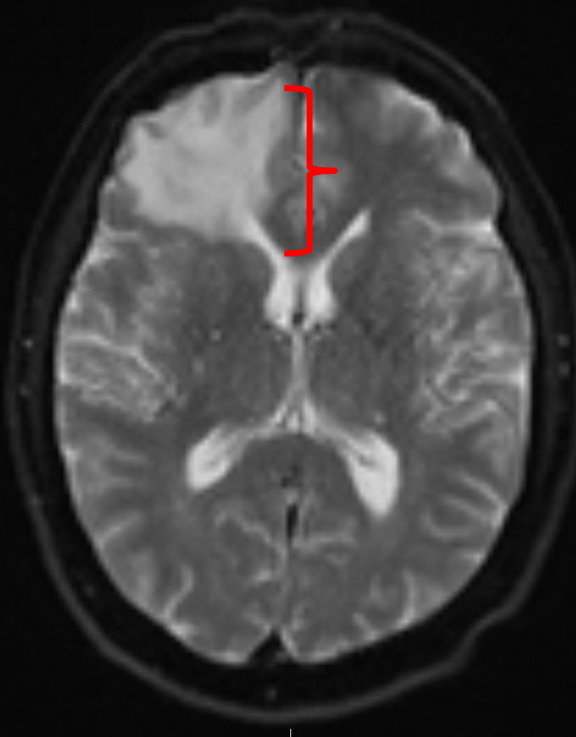


Vasogenic edema

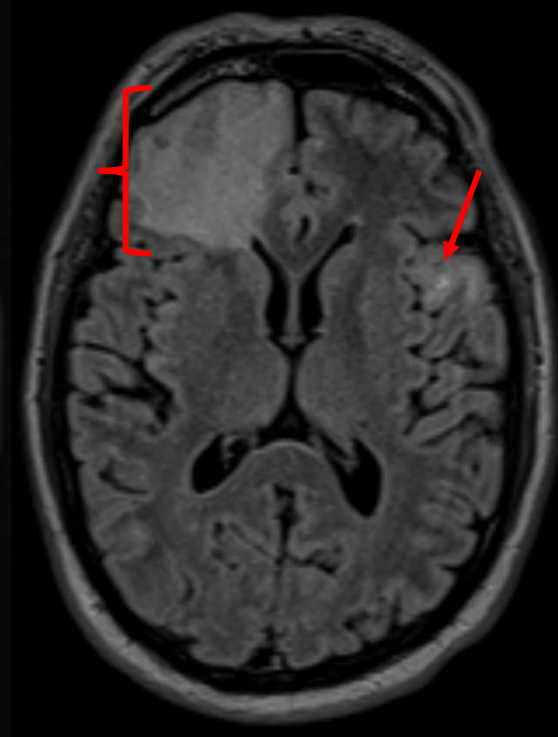
Sagittal T2



Axial T2

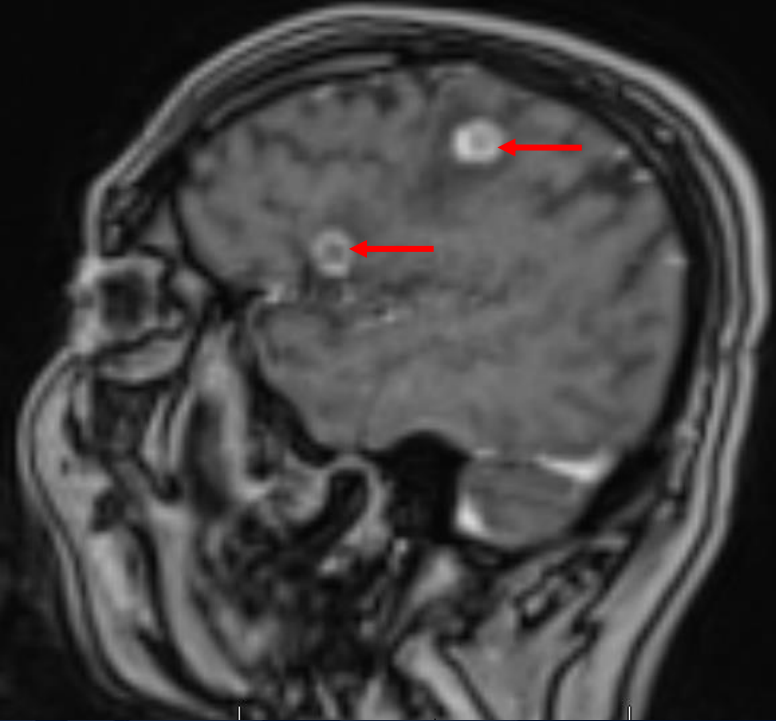


Axial T2 FLAIR



Vasogenic edema

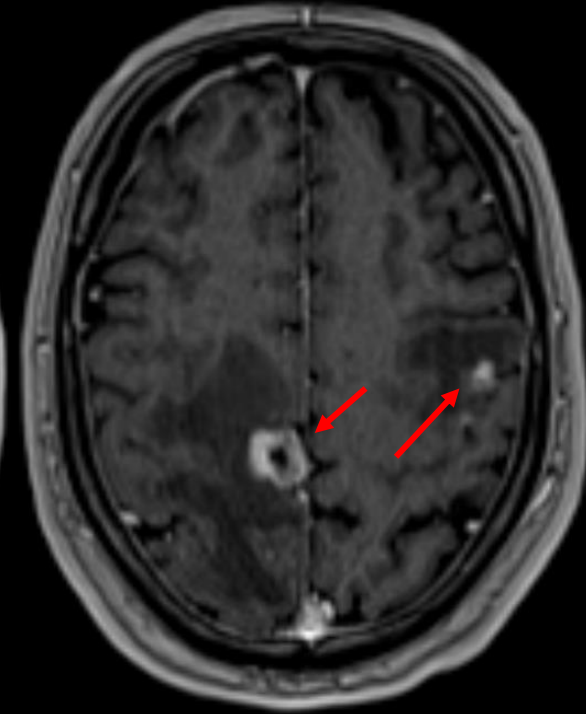
Sagittal T1 Post-contrast



Axial T1



Axial T1



Multiple intra-axial ring-enhancing centrally necrotic lesions within the frontal and parietal lobes with peritumoral vasogenic edema

Brain Metastasis

Clinical Presentation

- Headaches, seizures, mental status alterations, ataxia, nausea, vomiting and visual disturbances

Five primary malignancies account for 80% of brain metastasis

- Lung cancer, renal cell carcinoma, breast cancer, melanoma, gastrointestinal adenocarcinomas

Features

- Relatively well-demarcated from surrounding parenchyma, usually with a zone of peritumoral edema out of proportion to tumor size
- Often found at the grey-white matter junction or arterial watershed areas
- Certain malignancies are more susceptible to hemorrhage
 - Metastases that classically hemorrhage include melanoma, renal cell carcinoma, choriocarcinoma and thyroid cancer
 - Lung and breast cancer can also hemorrhage and are far more common than the classically hemorrhagic tumors

Differential diagnosis

- CNS neoplasm
- Brain abscess
- Post-treatment effects (post-surgical or post-radiation)

References

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