62-year-old female with gradually worsening back pain, leg weakness, and urinary incontinence

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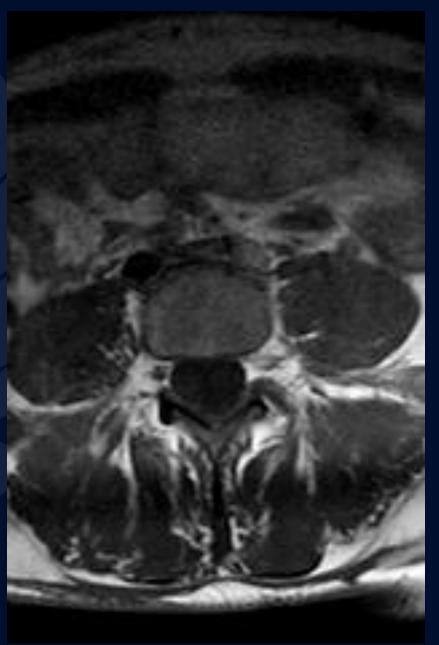






















Dural Ectasia



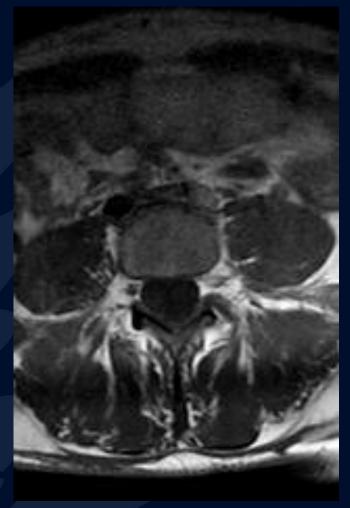
T1 T2





Multilevel vertebral body scalloping without evidence of central or foraminal stenosis or disc herniation

UCONN HEALTH RADIOLOGY T1 T2





No evidence of central or foraminal stenosis at any level



Dural Ectasia

"Dural Ectasia" refers to widening or ballooning of the dural sac, resulting in vertebral scalloping. It is sometimes associated with nerve root sleeve herniation, although that is not seen in this case.

Clinical Presentation: Often asymptomatic, though may present with low back pain, radicular pain in the buttocks and legs, lower extremity weakness, or urinary incontinence

Associations:

- Connective Tissue Disorders (Marfan, Ehlers-Danlos, Loeys-Dietz)
- Neurofibromatosis Type 1
- Cauda Equina Syndrome
- Ankylosing Spondylitis
- Osteogenesis Imperfecta
- Acromegaly



Imaging Findings

Plain Radiograph

 Posterior vertebral scalloping on lateral view can be seen, but is not specific for this diagnosis

MRI:

- T1: Difficult to distinguish due to hypointensity of CSF on this sequence
- T2: Increase in anteroposterior diameter of dural sac, often in lumbar region



References

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