

# 34-year-old male with progressive lower extremity weakness

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MR T1



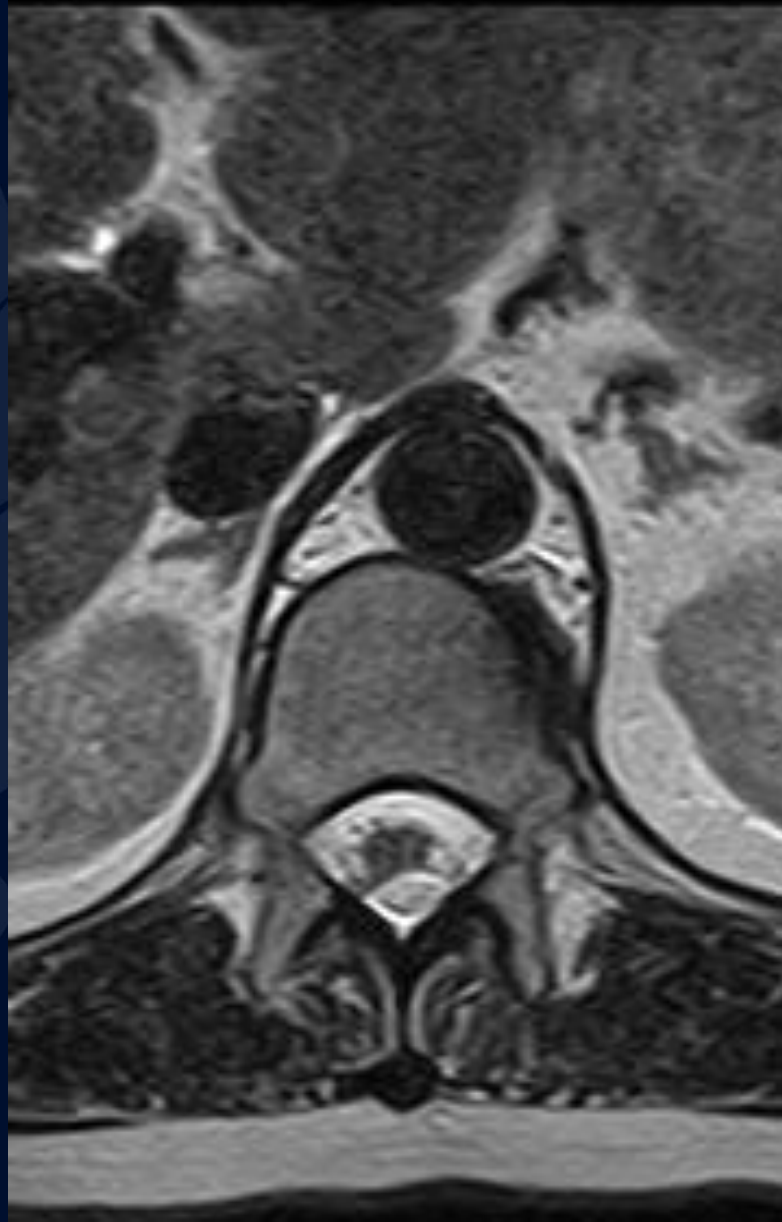
MR T2



# MR STIR



MR T2







# Lipoma of the Conus



T1



T2



Lipoma along the dorsal surface of the conus at the level of T11-12



T1

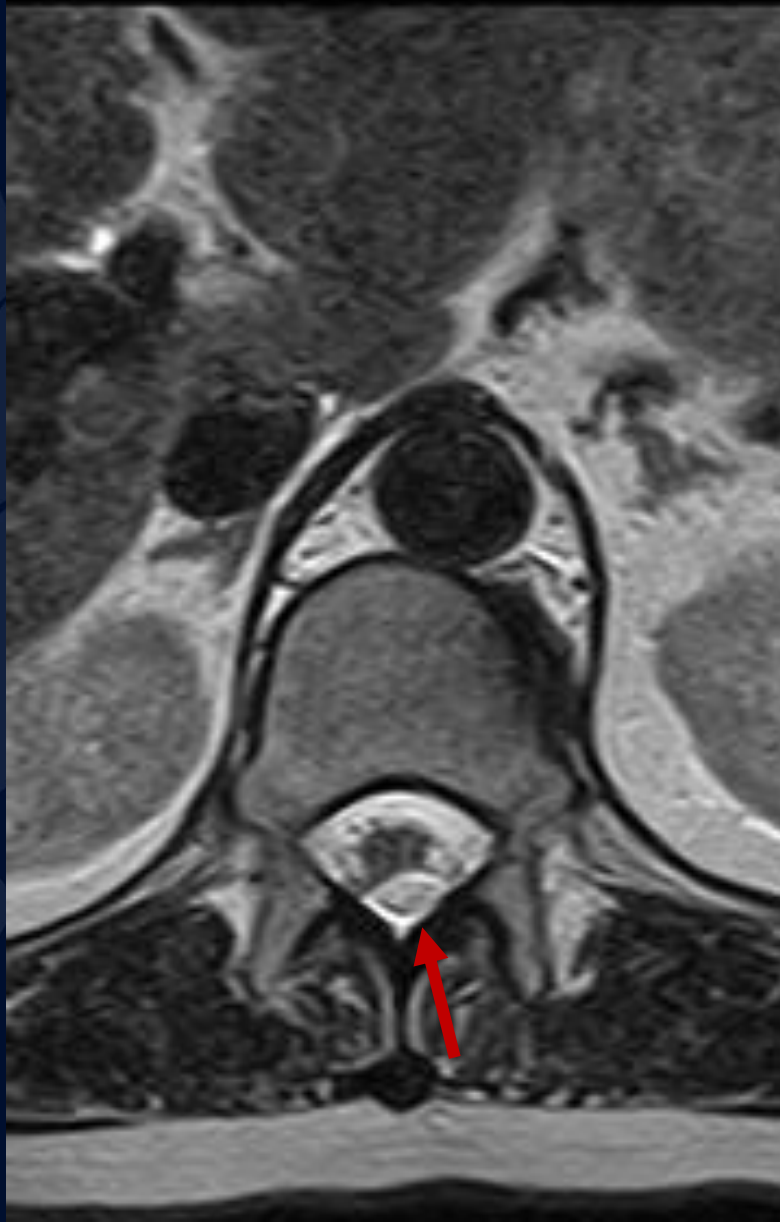


STIR



Lipoma along the dorsal surface of the conus at the level of T11-12, with loss of signal on STIR (fat)

## MR T2



Lipoma with  
hyperintense rim  
noted on the dorsal  
surface of the conus

# Lipoma of the Conus

**Clinical Presentation:** Often asymptomatic, though compression of the spinal cord can cause low back pain, radicular pain in the buttocks and legs, lower extremity weakness, and urinary incontinence

**Clinical Pearl:** Lipomas consist of normal fat and, although the pathophysiology of these lesions is poorly understood, they are not considered neoplastic

**Differential Diagnosis:**

- Lipomyelomeningocele
- Spinal Dermoid Cyst

# Lipoma of the Conus

## Imaging Findings

### CT

- Classically homogenous with low attenuation

### MRI

- T1: Hyperintense with no post-contrast enhancement
- T2: Hyperintense
- Fat-Suppressed: Hypointense

# References

Gupta A, Bansal K, Kalidindi KKV, Bhargava A, Verma A. Intradural Conus Medullaris Lipoma With Neurological Deficit: A Rare Occurrence. *Cureus*. 2021 Mar 23;13(3):e14053. doi: 10.7759/cureus.14053. PMID: 33898137; PMCID: PMC8059682.

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