Spontaneous Encephalomeningocele: A Case Report

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Case Report

MVPM, 36 years old, female. Patient complaining of ear pain, tinnitus pulsatile and hearing loss for 1 year. She didn't have a history of trauma, high BMI or hydrocephalus. She consulted otolaryngologists several times and received treatment for otitis media without success. Physical examination showed right tympanic membrane hyperemia in the upper quadrant, without other alterations. Audiometry was performed evidencing conductive hearing loss in the left ear with a 20dB gap. Magnetic resonance of 8° nervous eoding formation with sign similar to the cerebral parenchyma in T1, T2 and FLAIR and contours rounded occupies part of the epitimpanum and the mastoid antrum to the right, measuring about 0.8 x 0.7 x 0.6 cm, underlying bone failure in the tympanic tegmen. Such findings allow us to consider the possibility of meningoencephalocele. Reduction of encephalomeningocele via mastoid was performed the patient had a very satisfactory evolution after surgery and no more complaints (Figure 1).

Figure 1: Pre operative, the green arrow shows the encephalomeningocele.
References


