## A 34 years old woman referred with intractable neck pain

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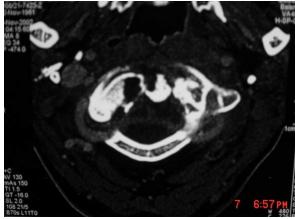
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A 34 years old woman unexpectedly healthy until 8 months ago was referred to the neurologic department because of intractable neck pain. She complained of severe neck pain that disturbed her daily activities and sleep.

Neurological examination showed severely neck stiffness. upper cervical tenderness, hyperhidrosis and mild hypereflexia at the left side. Other investigations such as hemogram, serologic evaluations for infectious disease, thyroid function tests, urine analysis, and chest x-ray were within normal ranges, however, ESR had been raised to 79 mm/h (normal up to 20). Cervical CT scan and cervical MRI (figure 1) showed odontoid and to a lesser extent atlas destructive lesions with soft tissue mass around them. Because of instability in atals-axis that could lead to C1-C2 dislocation, surgery was suggested for treatment and diagnosis. Tissue biopsy was obtained and presented in figure 2. She received appropriate therapy and enjoyed healthy life 2 months following the therapy.

*Now, what is your diagnosis?* (The answer is on *page 207*)



**Figure 1**. Sagital T1-weighted MRI scan of neck showed odentoid destructive lesion and soft tissue mass

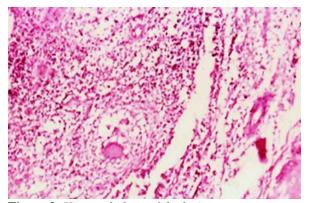


Figure 2. Histopathology of the lesion

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