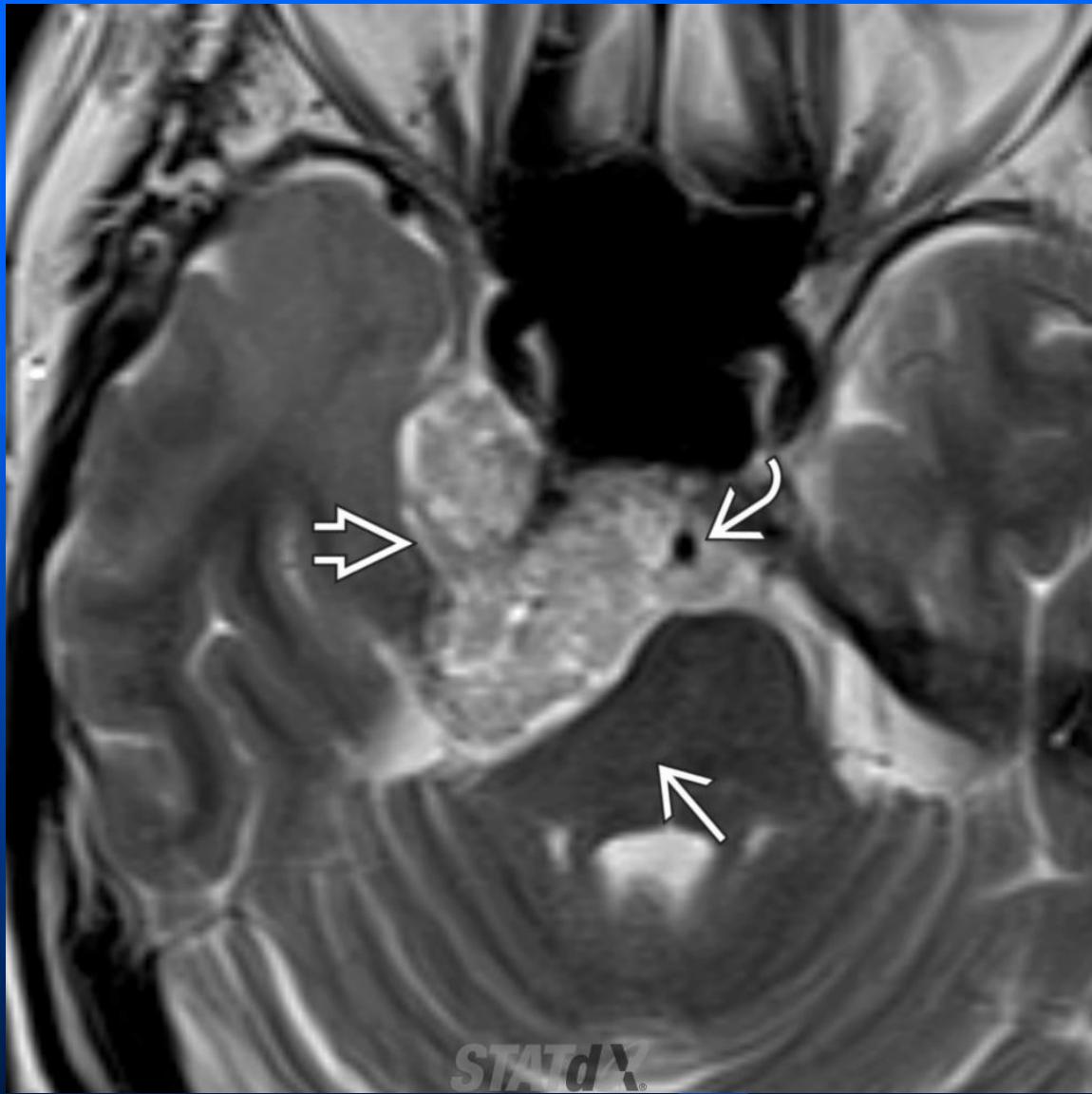


Schwannoma

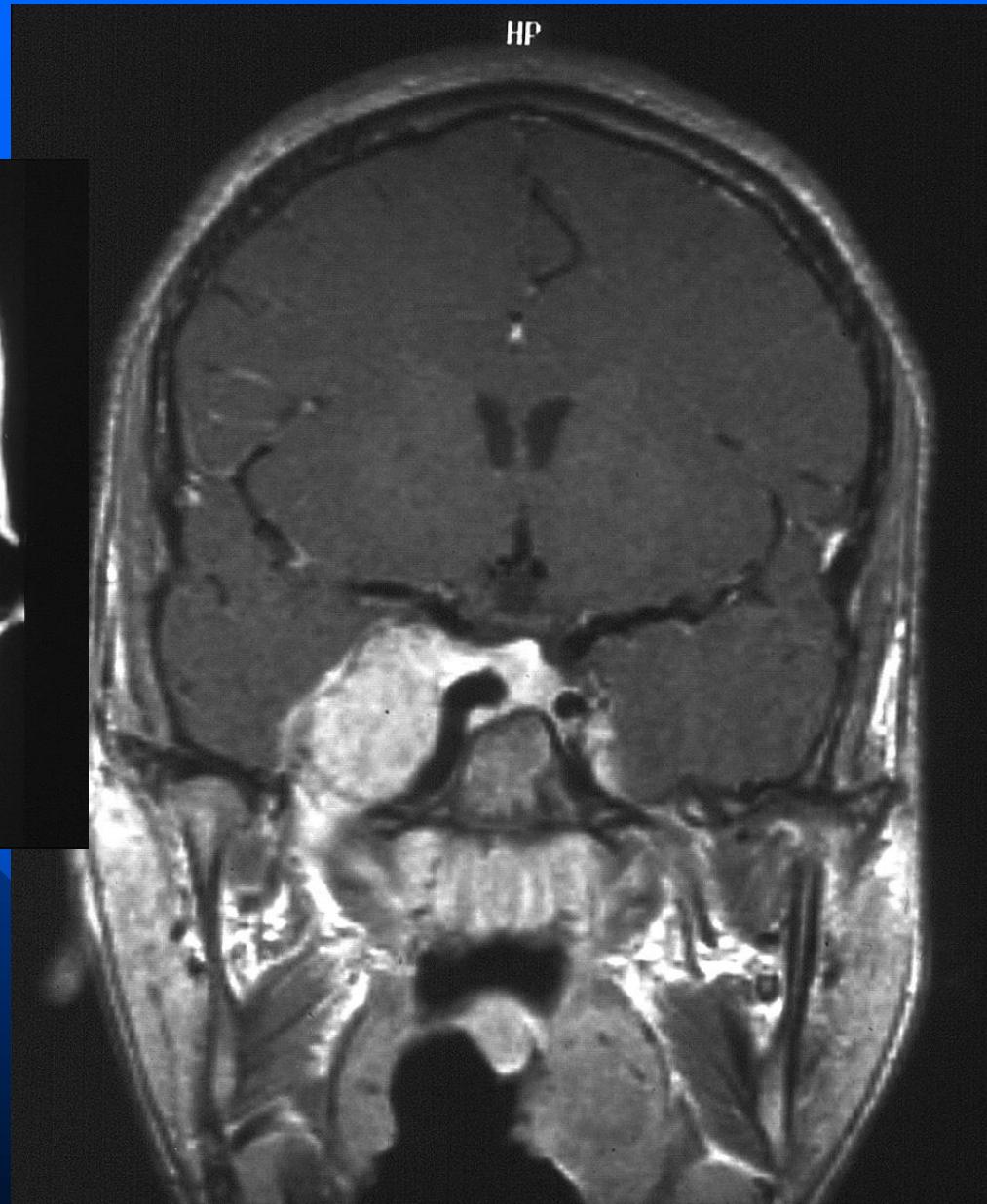
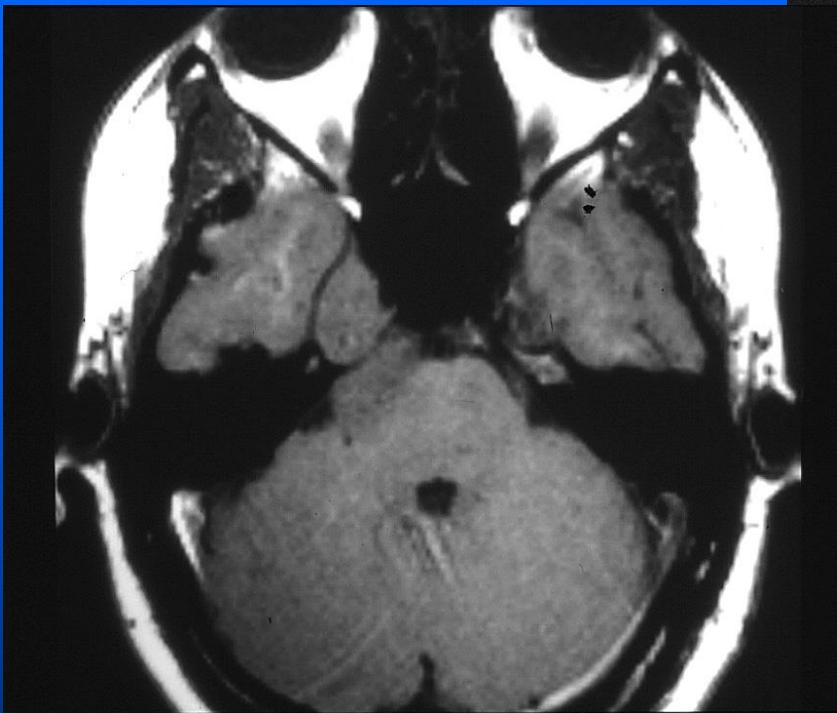
- Benign encapsulated nerve sheath tumor composed of differentiated neoplastic Schwann cells
 - 99% of all schwannomas associated with cranial nerves
 - 95% involve CN8
 - < 1% of all intracranial schwannomas are intraparenchymal.
- Imaging
 - Heterogeneously hyperintense on T2WI, FLAIR
 - 100% enhance (avid, heterogeneously)
- Trigeminal nerve (CN5) 2nd most common schwannoma
- Schwannomas of all other CNs are uncommon
- CN9 > 10 > 7 > 11 > 12
- Nonvestibular schwannomas of CN3, 4, 6 rare in absence of neurofibromatosis 2
- Multiple nVSSs should raise suspicion for Schwannomatosis

DDX:

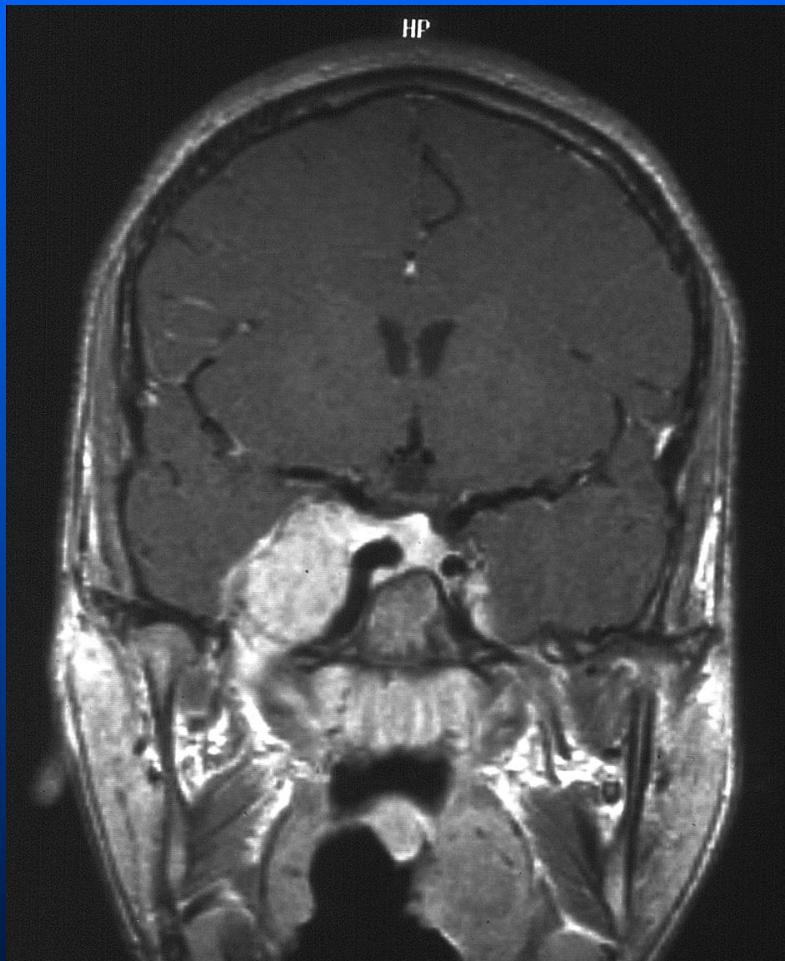
- Enlarged, enhancing cranial nerve
 - Metastases
 - Lymphoma
 - Multiple sclerosis
 - Neurofibromatosis type 2
 - Schwannomatosis



Right trigeminal nerve schwannoma in a 58-year-old man. Axial T2WI shows a heterogeneously hyperintense mass (white open arrow) extending from the cisternal segment through trigeminal cave, effacing the pons (white solid arrow) and contacting the basilar artery (white curved arrow).



Schwannoma CN V



Clinical findings of CN V lesion

Well-circumscribed, intra and extracranial

Mass effect on ICA, without narrowing



