

## A Case of the 10 days

### Case 368

A seventy-six-year-old male presented in our hospital for lumbago and appetite loss. He fell by himself, hitting lumbar spine one month ago. When he rode a car today, he realized himself losing appetite. Then, he called ambulance car for coming to our hospital. He took lumbar CT and MRI for further examination (Figs 1, 2). Laboratory test revealed PSA 1.537ng/mL, CRP 0.9mg/dL, Hemoglobin 12.6g/dL, white blood cells 3090/mm<sup>3</sup>.

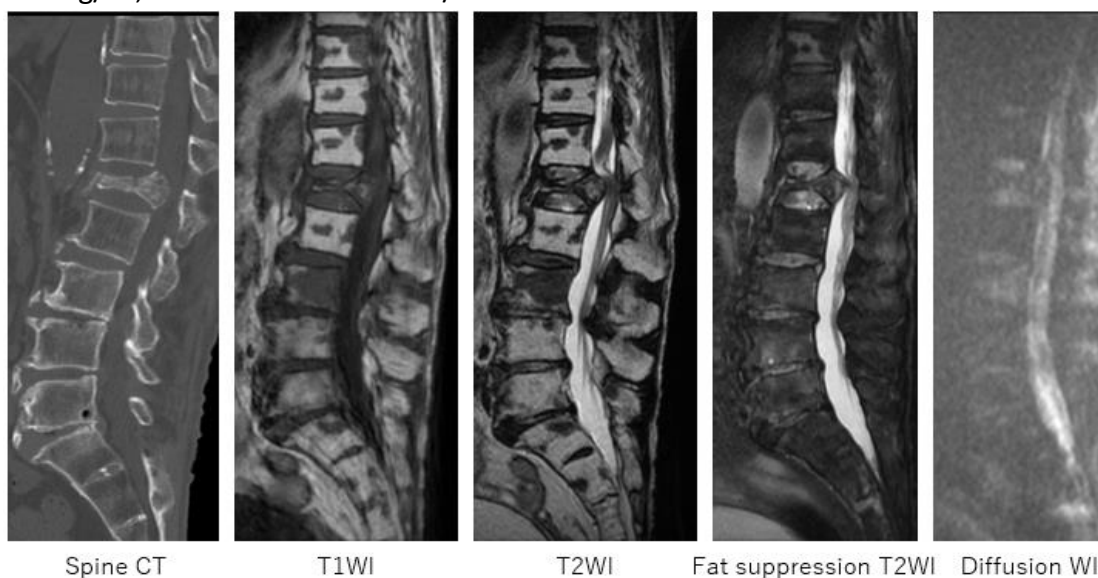


Fig.1 Lumbar spine CT depict L1 compression fracture with calcification. Compression of spinal cord end and equina are depicted on MRI T1WI, T2WI, fat suppression T2WI. Note multiple lesions with low signal intensity on T1WI and T2WI.

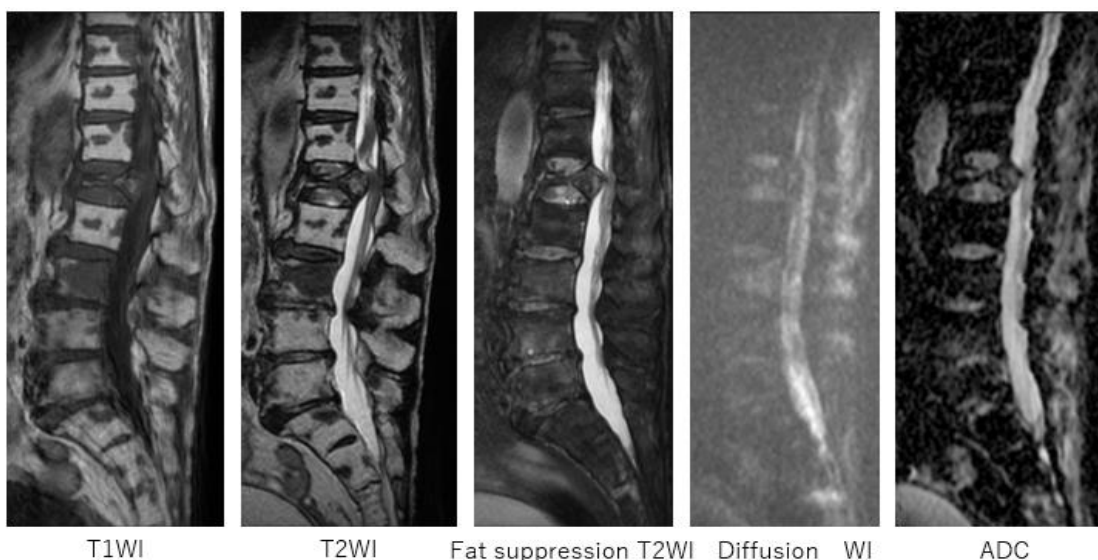


Fig.2 Multiple lesions with low signal intensity depicted on T1WI and T2WI are not clearly on fat-suppression T2WI. Diffusion WI depict slightly high signal intensity at L3 lesion whose ADC values are 0.487. ADC values of compression fracture are 0.849-0.945. ADC values of yellow bone marrow are 0.131-0.258-0.270. Lesions with low signal intensity on both T1WI and T2WI are 0.254-0.397-0.487.

## What is imaging diagnosis?

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1. **Multiple compression fracture**
2. **Pyogenic spondylitis**
3. **Multiple hemangioma**
4. **Metastatic bone disease**
5. **Bone marrow cell proliferation (regenerative bone marrow, myelodysplastic disease, myeloma, leukemia)**

answer

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