

Stealthily growing large sinonasal lymphoma with intracranial extension

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This is a brief report on a case of lymphoma in a 63-year-old man with no systemic illnesses, who presented with sudden onset painful defective vision of the right eye associated with drooping of the upper lid of one-week duration.

Multiple cranial nerves (II, pupil involving III, IV, and VI) were affected. Coronal and axial T2-weighted magnetic resonance imaging (MRI) showed a large sinonasal mass lesion with bony destruction and orbital and intracranial extension suggesting lymphoma that was confirmed on histopathological examination (Figure 1).

Conflict of Interests

The authors declare no conflict of interest in this study.

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None.

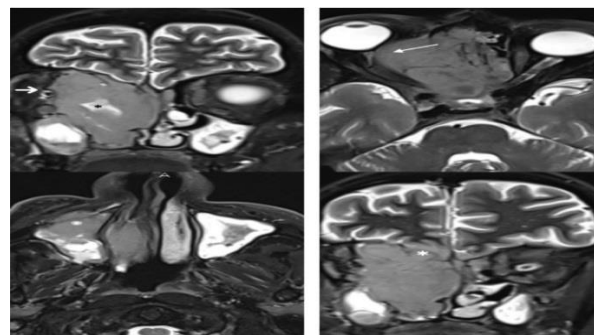


Figure 1. Left upper: Mass has its epicenter in the right side of the nasal cavity with intra-orbital extension into the extraconal space of the right orbit through the lamina papyracea causing mass effect on the infraorbital portion of the optic nerve (white arrow). The component of the lesion in the nasal cavity shows central necrosis (black asterisk). Right upper: Extension of the lesion into the extraconal space of the right orbit through the lamina papyracea with mass effect on the globe and infraorbital portion of the optic nerve (long white arrow). Left lower: Extension of the lesion through the anterior wall of right maxillary sinus (white asterisk). Right lower: Intracranial extension of the sinonasal mass into the basi-frontal regions (white asterisk)

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