A RARE CASE OF LANGERHANS CELLS HISTIOCYTOSIS OF THE SKULL

GZ Lee MBBS[1], Nelson KB Yap M.S (Neurosurgery)[1]
[1]Department of Neurosurgery, Sibu Hospital, Sarawak, Malaysia

Aim

Report of a rare case of Langerhans cells histiocytosis of the skull.

Methods

A 23 years old lady with underlying bilateral sensorineural hearing loss and previous history of smear negative PTB in 2015, completed anti-tuberculosis treatment presented with right frontal swelling since June 2022. The swelling progressively increased in size for the past 6 months and was soft and boggy in nature. It was painless and there was no associated fever. CT brain showed right frontal subgaleal collection with multiple osteolytic changes. MRI brain revealed a right frontal subgaleal collection with intracranial extension to the right frontal extra- and intra-dural spaces which was suggestive of empyema.

Results

Right craniectomy and washout was performed. The subgaleal and subdural collections were sent for culture but was negative. The osteolytic skull bone flap and dura were sent for histopathological examination (HPE) which revealed aggregation of foamy and hemosiderin laden macrophages in keeping with Langerhans cell histiocytosis. Other parts of the body were screened but was unremarkable. There was no recurrence seen on follow-up MRI brain after 3 months.

Conclusion

It is of vital importance to send HPE for suspicious cases to prevent missed or late diagnosis, as Langerhans Cells Histiocytosis and empyema are two distinct conditions with two different treatment regimes.