An Original Paper

Vertebral Aneurysmal Bone Cyst

A Case Report and Review

Mark R. Brinker, MD,* Thomas S. Whitecloud III, MD,* Plas T. James, MD,* Michael R. Hand, BS,* and Harold M. Antwine III, BA*

ABSTRACT

The case of a 16-year-old boy with an aneurysmal bone cyst of the fourth lumbar vertebra and a herniated nucleus pulposus of the LA-5 disc is presented. Symptoms included progressive lower back pain and bilateral lower extremity weakness. Roentgenographic studies were consistent with a vertebral aneurysmal bone cyst with an expansile lesion that compromised the neural canal and an LA-5 herniated nucleus pulposus. Surgical treatment included tumor excision, LA-5 discectomy, lumbar decompression, and posterolateral and anterior lumbar fusion. Postoperatively, the lower back pain and lower extremity symptoms resolved. The patient continues to do well at 1-year follow-up.

An aneurysmal bone cyst is a lesion of uncertain etiology that was originally described by Jaffe and Lichtenstein¹ in 1942. Theories suggest that the tumor is either a vascular disturbance of bone (eg, skeletal hemangioma, arteriovenous malformation) or that it may arise as an abnormal reparative process. Dahlin⁴ reported an incidence of 1.4% in 2,000 primary bone tumors. Less than 100 cases of vertebral involvement have been described in the English literature.³

CASE REPORT

A 16-year-old boy presented to Tulane University Hospital (New Orleans) with a complaint of progressive lower back pain. The patient related the onset of pain to an automobile accident that occurred 1 year prior to admission. He described the pain as a dull, poorly localized sensation that had worsened

^{*}Drs. Brinker and James are Residents, Dr. Whitecloud is a Professor, and Maurs. Hand and Antwine are Students, Department of Orthopaedic Surgery, Tulane University School of Medicine, New Orleans, Louisiana.