Dear Editor,

I read with great interest the paper by Figueiredo et al describing a case of epidural capillary hemangioma of the thoracic spine. They are, indeed, very rare tumors and reported as case reports, as mentioned in the represented manuscript. Most of the hemangiomas seen at the location are the cavernous type. Capillary-cavernous, arteriovenous, or venous hemangiomas with pure spinal epidural location are uncommon vascular tumors in contrast to those in the other sites of spinal column. We reported the first MRI study of a case of epidural mixed type capillary-cavernous hemangioma of the thoracic spine with foraminal extension presenting during the third trimester of pregnancy in 2007. In MR examination, the sign of spinal epidural hemangiomas is generally homogeneous and similar to that of spinal cord because of the slow blood flow on T1-weighted images. These tumors have high signal intensity on T2-weighted images because of the high content of stagnant blood. The tumor was reported as mixed type because in histopathological examination, the specimen was showing a tumor composed of dilated and rather thin-walled cavernous component and numerous small capillaries of the capillary component adjacent to each other. As it was stressed by the authors, epidural capillary hemangiomas should be included in the differential diagnosis of spinal epidural lesions, and surgical excision is recommended.

References