

9<sup>th</sup> International Conference on  
**Clinical & Medical Case Reports**

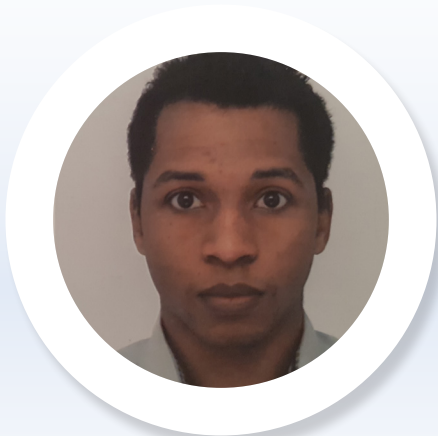
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**Skull base Non-Hodgkin's lymphoma**

**P**Primary skull base lymphoma accounts for 1%-2% of all skull base tumors. It is a very rare condition, which poses a diagnostic challenge in clinical practice and needs early diagnosis and treatment. We present a case of primary lymphoma of the skull base in a 53-year-old woman, who was admitted with complaints of bilateral temporal pain, facial numbness, slurred speech, difficulty in swallowing and deafness. Computed Tomography (CT) and Magnetic Resonance Imaging (MRI) showed ill-defined destruction of the petrous temporal bone with a high signal area noted on T2 weighted images in the right temporal lobe which initially was thought to be skull base osteomyelitis. However, a finding of a thin sub periosteal dense soft tissue in the left parieto-occipital region seen with intact adjacent bone cortex similar in appearance to that of the primary skull base pathology alerted the team to possible diagnosis of skull base lymphoma. Subsequent tissue diagnosis confirmed diffuse large B-cell lymphoma. We present this case report to highlight the rarity of the case and significance of correct diagnosis.

**Biography**

Muhammad Haruna started working as a doctor 2 years back and is currently working as FY2 doctor at Hull Royal Infirmary, UK.

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