

# Intracranial dermoid cyst mimicking a thrombosed giant aneurysm of the anterior communicating artery

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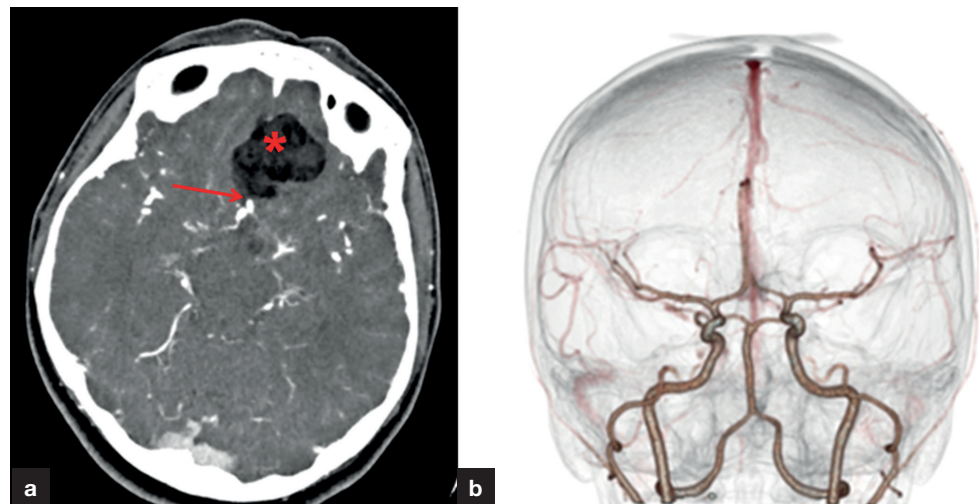
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A 23-year-old woman presenting with complaints of headache and vomiting was referred to the authors' radiology department for further examination. Magnetic resonance imaging showed a lesion, which was heterogeneously hyperintense on T1-weighted imaging. Susceptibility-weighted imaging showed a blooming artefact within the mass, suggestive of thrombosis or haematoma. Computed tomography scan demonstrated a low-density (-25 HU) lesion in the anterior cranial fossa. The lesion had a close relationship with the anterior communicating artery (**Figure 1a**). Computed tomography angiography was performed because an aneurysm was suspected, but the arterial anatomy was found to be normal (**Figure 1b**).



**Figure 1.** a. Computed tomography scan revealed a low-density lesion in the anterior cranial fossa, close to the anterior communicating artery (arrow). b. Computed tomography angiography showed normal cerebral arterial anatomy.

Intracranial dermoid cysts are rare slow-growing benign tumours, comprising 0.04–0.7% of intracranial tumours (Kucera et al, 2011). Dermoid cysts are usually hypodense on computed tomography scan, and hyperintense on T1-weighted magnetic resonance images (Kucera et al, 2011), so can mimic other intracranial lesions such as thrombosed aneurysms, haematomas and proteinaceous cysts (Canbaz et al, 2004).

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