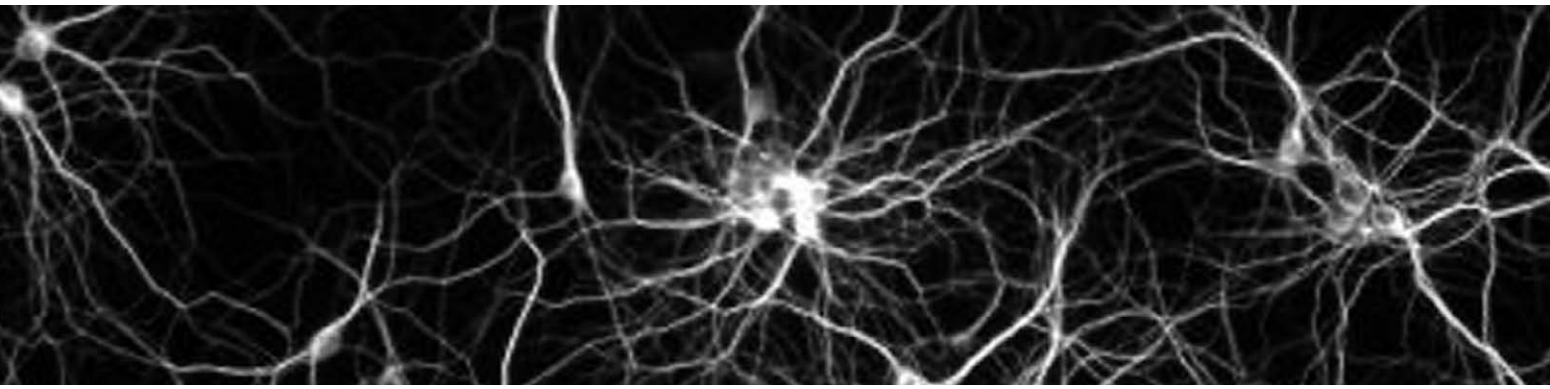

CLIPPERS: chronic lymphocytic inflammation with pontine perivascular enhancement responsive to steroids

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Keywords: neuroinflammatory diseases, lymphocytes, pons, magnetic resonance imaging, steroids

A 71-year-old man was referred for a neurological examination due to instability. Dysphonia, dysphagia, and ataxia were present in neurological examination, while punctate and curved gadolinium enhancement "peppering" lesions of the pons and the cerebellar peduncles were present in the MRI of the brain (Figs. 1–3). The MRI of the cervical spine was normal. The CSF analysis revealed only mild lymphocytic pleocytosis (cell count 30/3). The oligoclonal bands were negative in CSF and serum (type 1). The results of ACE, immunological tests, tumor markers, and serological tests for neurotropic pathogens, as well as testing for HIV, lues, and tuberculosis, were normal. The patient was treated with high-dose IV methylprednisolone (1 g/day) for five consecutive days, followed by a taper with oral steroids for six months, after which complete clinical and neuroradiological remission was achieved (Figs. 4 and 5). Based on the results of these findings, the diagnosis of CLIPPERS was established. CLIPPERS is a rare neuroinflammato-

Fig. 1. *Axial T2WI MRI shows multiple punctate and patchy regions in the pons and cerebellar peduncles.*

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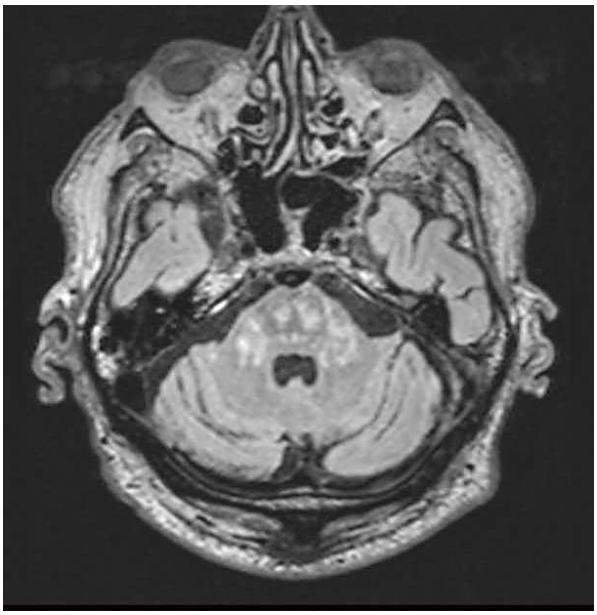

Fig. 2. *Axial FLAIR MRI shows multiple punctate and patchy regions in the pons and cerebellar peduncles.*

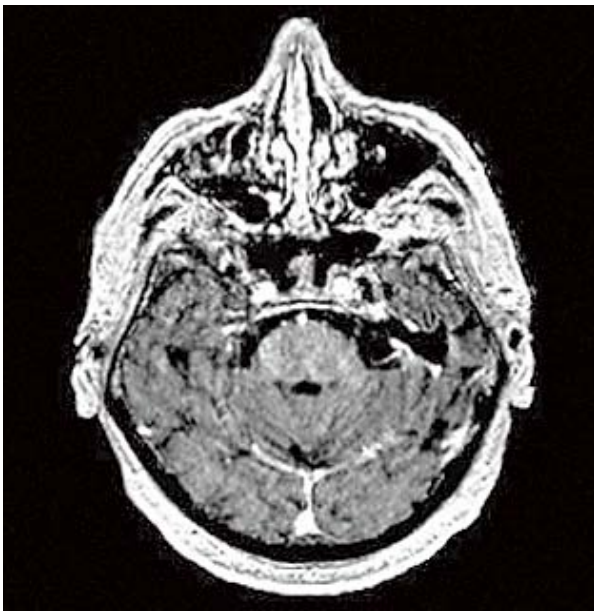

Fig. 3. *Axial contrast-enhanced T1WI MRI shows punctate foci of contrast enhancement in the pons.*

Fig. 4. *Control axial T2WI MRI shows normal findings.*

Fig. 5. *Control axial FLAIR MRI shows normal findings.*

ry disorder characterized by brainstem-predominant encephalomyelitis that typically presents with cerebellar (ataxia) and bulbar involvement (dysarthria, dysphagia), typical MRI findings, and an excellent therapeutic response to steroid administration (1, 2). It is to be expected that the broader availability of highly sensitive neuroradiological diagnostics will naturally contribute to the efficacy and accuracy of finding this disease.

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