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**Neurology Publish Ahead of Print**

**DOI: 10.1212/WNL.0000000000207172**

**Teaching NeuroImage: Presence of a Human Tail in an Infant With Spinal Dysraphism  
and Congenital Clubfeet**

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Luziany Carvalho Araújo: Drafting/revision of the manuscript for content, including medical writing for content; Major role in the acquisition of data; Analysis or interpretation of data

**Figure Count: 3**

**Table Count: 0**

**Search Terms:**

[ 120 ] MRI, Human tail, Intradural lipoma, Spinal cord tethering, Spinal dysraphism

**Acknowledgment:**

Special thanks to Suzana Serra for the surgery image courtesy.

**Study Funding:**

The authors report no targeted funding

**Disclosures:**

The authors report no relevant disclosures.

**Preprint DOI:****Received Date:**

2022-09-07

**Accepted Date:**

2023-01-25

**Handling Editor Statement:**

Submitted and externally peer reviewed. The handling editor was Resident and Fellow Deputy Editor Ariel Lyons-Warren, MD, PhD.

A newborn who was diagnosed with congenital clubfeet in utero using ultrasound was born with a human tail (Figure 1A). Clinical examination revealed a pigmented stain and a pilonidal dimple above the tail (Figure 1B). No neurological dysfunction was noted, and the reflexes were intact. In view of the presence of tail/dimple, MRI of the spine was performed which showed occult spinal dysraphism, a tethered cord caused by an intradural lipoma and a hydrosyringomyelic cavity (Figure 2). The patient underwent surgery (Figure 3), to excise the intradural lipoma and human tail.

Patients with cutaneous stigmata such as a dimple, pigmented stain, skin appendage or asymmetric gluteal cleft should be investigated radiographically with ultrasound or MRI for underlying spinal cord abnormalities like spinal dysraphism and spinal cord tethering<sup>1</sup>, even in cases without neurological symptoms. While tail position tends to correlate with underlying etiology, the cause may vary dramatically<sup>2</sup>.

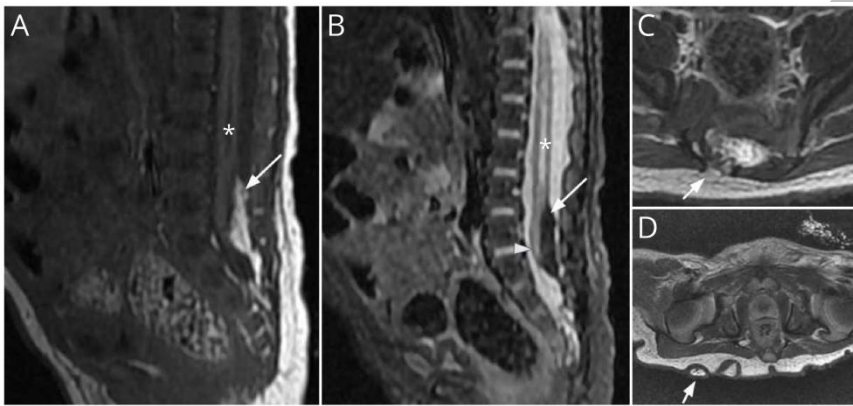
### Figure 1: Physical exam at 36 days of life

Demonstrating (A) 11 cm human tail located in the right paramedian sacral region and club feet as well as (B) hyperchromic stain and pilonidal dimple (arrow).

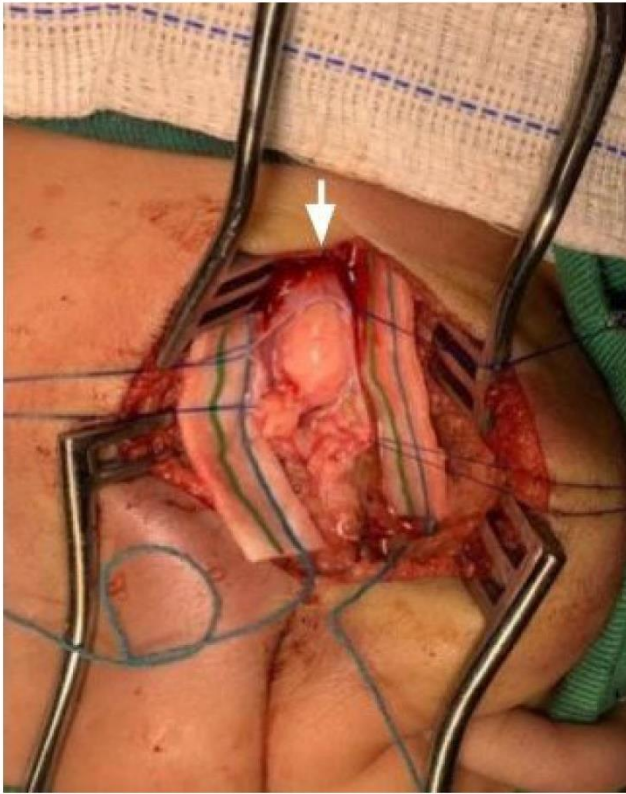


**Figure 2: MRI of the lumbar spine.**

Sagittal T1-weighted (A) and T2-weighted with fat-sat (B) images show a terminal intraspinal lipoma (arrow) attached to the conus medullaris (arrow head). The cord is tethered at L5-S1 level. There is also a central cystic dilatation in the spinal cord (asterisk) consistent with a hydrosyringomyelic cavity. Axial T2-weighted images at S2/S3 level (C) demonstrating defect of fusion of posterior arches (arrow) and Co2/Co3 level (D) showing tubular appendage composed of subcutaneous fat tissue and covered by skin, emerging in the paramedian sacrococcygeal region, compatible with the tail (arrow).



**Figure 3: Surgical excision confirms intradural lipoma (arrow).**



<http://links.lww.com/WNL/C671>

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*Neurology* published online March 6, 2023

DOI 10.1212/WNL.0000000000207172

**This information is current as of March 6, 2023**

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