

Argentinean authors Gatto et al. ([11](#)) suggested that

“Spinal cord cavitation is a frequent finding in optic neuromyelitis (Devic's syndrome)”

whilst being a rare occurrence in patients with the similar condition multiple sclerosis.

They looked at 6 patients with DS and 3 with MS.

Those with DS all had the relapsing form of the disease but a normal brain MRI.

Spinal MRI showed

“unenhanced central cavities which extended more than 3 vertebral bodies”;

In the MS patients, who had the relapsing, remitting form of the condition, had hyper intense T2 enhancing lesions on spinal MRI and non communicating cavities extending less than 2 vertebral levels.

As we have seen, some people with arachnoiditis have had suspected or proven MS.

A further, uncommon, complication is **communicating hydrocephalus**.

This is thought to be due to alterations in the cerebrospinal fluid dynamics, due to the effects of the scarring in the subarachnoid space.

Jensen et al. ([\[ii\]](#)) published a paper in the journal *Neuroradiology* of a fatal case of obstructive hydrocephalus after oil-based myelography; the authors described features typical of the Pantopaque reaction seen in animals.

They described postmortem findings of occlusion of the foramina of Magendi and Luschka by granulation tissue and inflammatory features typical of Pantopaque reaction.

[\[i\]](#) Mabel Gatto E, Reisin R, Nogues M, Uribe Roca MC, Dominguez R, Giannaula R, Zurru MC, Rugilo C. *Neurologia* 2002 Mar;17(3):165-9 [Hydrosyringomyelia in demyelinating diseases]

[\[ii\]](#) [Jensen F, Reske-Nielsen E, Ratjen E.](#) *Neuroradiology*. 1979 Sep 26; 18(3): 139-44. Obstructive hydrocephalus following Pantopaque myelography.