

CASE 2

Submitted by: Dr. Irwin Feigin, New York University Medical Center, New York, N. Y.

This 26-year-old man died two years after the onset of symptoms referable to a neoplasm in the thorax and neck. This neoplasm was diagnosed by biopsy, as a bronchogenic carcinoma. He was treated by radiation and Myleran.

There were no neurological abnormalities until three weeks before death, when the patient noted dizziness and visual difficulties. The terminal course was characterized by headache, dizziness, increasing confusion and disorientation. Examination revealed bilateral papilledema, left homonymous hemianopsia, left hemiparesis and a positive Babinski sign on the left. A right carotid angiogram indicated the presence of a right cerebral mass.

At autopsy, neoplastic tissue was present in both lungs and in the superior mediastinum, visceral pericardium, and in the right supraclavicular area. This tissue was interpreted microscopically as bronchogenic carcinoma.

There was a well demarcated tumor nodule 9x4.5x4.5 cm. in size in the right parietal area of the brain, impinging on the right lateral ventricle. The tumor tissue was soft, friable, granular, dark red in color and largely hemorrhagic and necrotic. The surrounding tissues were edematous, the gyri were flattened, and herniations of the right hippocampal gyri were observed.