

CASE 1997-8

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Clinical History:

A 24 year old female was seen in the emergency room with a chief complaint of musculo-skeletal pain involving the left hemithorax. A root canal procedure had been performed two weeks prior and she was also in the sixth week of pregnancy. While in the emergency room she developed a focal seizure involving the left arm which rapidly progressed to generalized seizure activity with loss of consciousness, emesis, and respiratory failure requiring intubation. She subsequently spiked fevers to 107° and experienced a spontaneous abortion.

She did not recover consciousness. Multiple examinations of serum and CSF failed to reveal evidence of rickettsial, viral, syphilitic, or HIV involvement of the central nervous system. She was treated empirically with antibiotics and steroids, developed disseminated intravascular coagulation followed by multi-organ failure and expired ten days later of a fulminating illness of undetermined etiology.

Necropsy findings:

The dura mater was unremarkable with no evidence of thrombosis.

The brain weighed 1225 grams and had a dusky, congested appearance. The leptomeninges were free of infiltrate. The external surface of the cerebrum was unremarkable. Examination of the base of the brain revealed herniation of the right uncus and both cerebellar tonsils. The large vessels of the anterior and posterior circulation were unremarkable as were the cranial nerves and brainstem.

Coronal sections revealed congestion with mild herniation of the right uncus and of both cerebellar tonsils. No other significant changes were present.

Material submitted: H&E and unstained sections of hippocampus and cerebellum

Points for discussion: 1. Basic Diagnosis

2. Unusual Aspects of the History and Clinico-Pathologic Correlation

3. Preventive Medicine Implications for the Hospital and Community