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A previously healthy 15-year-old female was seen because of difficulty moving her right leg and right arm for the past two days. This was not preceded by seizures, syncope or sensory disturbances. She had suffered from chronic headaches since the age of 11 and for the first time, she had begun to have projectile vomiting. She complained of no difficulties with vision or other related symptoms.

On admission, she was described as an obese, well-oriented, pleasant patient with obvious weakness of the right limbs, no cranial nerve disturbances and no sensory deficits. There was no evidence of papilledema.

Brain scan showed a positive uptake in the left parasagittal-parietal region and the arteriogram showed an increased vascularity in the same area. The EEG disclosed a left temporal focus of "spike activity".

Other laboratory data and the remainder of the physical examination were within normal limits.

At craniotomy, a sample of an intraparenchymal mass was obtained.

The slides distributed are stained with hematoxylin and eosin.

Points for Discussion:

1. Diagnosis of this tumor: Glial? Mesodermal?
2. Prognosis ?
3. Mode of therapy Removal

*Mesench. Chondrosarcoma  
 or Myofibro. etc*