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A 60-year-old woman received a three-day-course of 8 subcutaneous and intramuscular injections of fetal lamb tissue which contained brain, liver, heart, thymus, and ovary without immediate subsequent untoward reactions.

3 days later she started to develop headache as well as fever of 38° C. Another 2 days later her legs felt numb. In the middle of the night she fell and was brought back to bed by her husband. Thereafter, she fell out of bed and it was then noted that she had a right hemiparesis and was unable to speak. During the next few hours she lapsed into coma and was brought to the hospital unconscious, where the right hemiparesis was verified. A CT scan revealed white matter lesions of decreased density in both cerebral hemispheres which were interpreted as encephalitis. She had 270 cells in her CSF on admission, largely composed of lymphocytes. Vigorous intravenous steroid therapy was started and continued throughout her hospital stay which fatally ended 8 days after her admission, 12 days after the onset of clinical symptoms and 15-17 days after her course of fetal lamb "fresh cell" tissue therapy without ever regaining consciousness.

At autopsy, major visceral pathology was not noted. Small perivascular lesions were found in the cerebral and cerebellar white matter, especially in the parieto-occipital area and in the upper brain stem. The spinal cord and peripheral nerves were not submitted.

Material submitted: One H&E slide from the cerebral white matter
One blank slide from the cerebral white matter

Points for discussion: 1. Diagnosis
2. Pathogenesis
3. Questions

Is this the human equivalent of hyperacute experimental allergic encephalomyelitis?

Is there any causal relationship between the "fresh cell" therapy and the patient's encephalopathy?

Does vigorous intravenous steroid therapy explain the lack of inflammatory cells within the cerebral lesion?