

CASE 10

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Clinical Abstract:

This was a 52-year-old female with a long history of headaches which became severe the year before admission when she had several dizzy spells, experienced episodes of burning sensation on the right side of the face, and fainted on one occasion.

On admission the neurologic exam was unremarkable. Both the CT and MRI head scans showed what was interpreted as a large right temporal cystic lesion with a medial mass. Craniotomy disclosed a large firm temporal intraventricular lesion which was partially excised. An increase of intracranial pressure after the surgery was controlled with a ventriculostomy and repeated lumbar punctures, but a pneumonia supervened. The patient lapsed into coma and died on the twelfth postoperative day. Autopsy revealed no major visceral pathology. Brain contained a sickle-shaped, firm, gray mass which filled the right atrium and extended into the inferior horn for a distance of 35 mm, gradually tapering off. There was a massive intraventricular hemorrhage, extensive necrosis in and around the operative field, and a right-sided transtentorial herniation.

Material Submitted:

One 2 x 2 Kodachrome of gross lesion in the right atrium.

Two H&E stained slides:

- a) lesion in the atrium (biopsy)
- b) lateral ventricle (autopsy)

Point for Discussion: Diagnosis