

Case 6

Submitted by: A.W. Bollen, M.D., Department of Pathology,
University of California, San Francisco, CA 94143.

Clinical Abstract: A thirty-three year old woman who had previously been in good health developed an aura while driving, much like she was being projected forward, accompanied by difficulty with memory and a degree of confusion. Stopping at a nearby house, she had a generalized seizure, but was not incontinent. When brought to the emergency room, she had a fairly rapid recovery, although headache persisted until the following morning.

There was no prior history of head injury. The patient had never experienced a seizure before but on three prior occasions in the previous six months had similar episodes of feeling her body being pushed ahead, each lasting a few minutes. Examination the morning following the seizure revealed an alert and oriented patient with good memory and appropriate affect. The pupils were 5 mm. and equally reactive to light with visual fields full. Extraocular movements were full without any nystagmus and trigeminal motor and facial motor function was intact. Muscle strength, bulk and tone were normal throughout. Deep tendon reflexes were trace in the upper extremity, 1+ at the knee, and trace at the ankles with a flexor plantar response. The sensory exam was intact. The cerebellar exam was normal, with station steady, Romberg negative and gait well-performed. Ocular examination showed discs flat without exudates or hemorrhages.

Spinal fluid examination showed 17 white cells of which 16 were mononuclears and one a polymorphonuclear leukocyte. CSF protein and glucose were normal and CSF culture, India ink preparation and VDRL negative. Antinuclear antibody was negative.

CT scans of the head showed a relatively low density area in the right frontal region and a relatively high density area in the left internal capsule. Following contrast enhancement, there was a wide area of blush in the right frontal region with surrounding edema and a dense area of contrast enhancement in the left caudate nucleus-internal capsule region. No mass effect was present and the third and fourth ventricles were normal. A right frontal lobe biopsy was performed.

Material Submitted: One H & E slide.

Point for Discussion: Diagnosis.