

CASE 11

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A 6 year old girl was admitted without previous medical treatment 8 days prior to death because of abdominal pain, lethargy and inability to walk, beginning 5 days after a sore throat. The day prior to admission she complained of epigastric pain and on the morning of admission she could not walk. She received no medication at home. The past history revealed only that she had had measles and chicken pox. There was no history of trauma or pica.

On admission her temperature was 102°; blood pressure 160/90; respirations 60, and pulse 96. The reflexes were normal in the right leg but absent in the left leg. She could move neither lower extremity and Kernig's sign was positive. She had brief horizontal nystagmus. There were no other neurologic findings until 24 hours later when the Babinski sign was found to be positive bilaterally.

A lumbar puncture showed a pressure of 200 mm. water with 13 lymphocytes and 2 polys; sugar 66 mgm. %; protein 38 mgm. % and chlorides 111 mEq/liter. Blood and urine examinations throughout the course were normal as were x-rays of the skull, long bones and chest. Cultures of the pharynx, rectum, CSF and the brain at autopsy grew no virus.

On the second hospital day the respirations became Cheyne-Stokes and shortly afterwards, she was apneic and required a mechanical respirator. Her temperature was 100-103°F. throughout the course.