

CASE 8

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A 35 year old, diabetic, hypertensive woman is said to have experienced severe malaise and to have tended to drop objects easily from her hands for several months before death. Nine days before death, she suddenly experienced right sided headache, numbness and tingling of right hand and forearm, became confused, irrational and then drowsy. On admission the next day, T. 102.2°F., P.R. 110, B.P. 180/110, and respirations were Cheyne-Stokes in type. The neck was stiff and the Brudzinski sign was positive. The pupils were unequal and reacted poorly. The patient was depressed but not comatose. The deep reflexes were equal but Babinski signs were present bilaterally. W.B.C. 18,200; the urine contained sugar, protein, but no acetone; C.S.F. clear, protein 46, 35, 19 mgs.%; sugar 318, 108, 38 mgs.%; cells 71 (P. 90, L. 2, ?8), 3, 2. Cultures negative for bacteria and fungi.

Her course until death 8 days after admission was characterized by decreasing temperature, eventually below normal, facial edema, convulsions, and episodes of apnea and pulselessness requiring cardiac massage. Therapy consisted of insulin and varied antibiotics.

Autopsy revealed old and fresh myocardial infarcts, acute pulmonary edema, Kimmelstiel-Wilson kidneys, interstitial fibrosis of the pancreas, and a single bone marrow embolus in a small vein in the cerebral dura. There were no gross changes in the cerebrum, except for a fine dark brown speckling in the base of the pons. Microscopic changes were limited to the pons, and are illustrated in the sections submitted.