

CASE 5

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The patient was a 39-year-old white male who died within one year of the onset of axillary, submaxillary and neck lymphadenopathy. A tissue diagnosis of lymphoma was established within one month of the onset of his illness. The patient was placed on Cytosan and vincristine. Five months after the onset of his illness the patient noted the loss of use of his right hand and the loss of sensation of the left lateral forearm. He developed pains in his right arm and left leg. This was followed by loss of vision in the left eye and ptosis of left eye lid. He was given methotrexate intrathecally and large doses of Cytosan I.V. Cutaneous infiltrates of the chest, abdomen, hip, forearm and hand and pulmonary infiltrates developed subsequently. After 8 months severe head and neck pain and a further loss of vision ensued. An LP during this time revealed lymphoma cells in the CSF. The patient's terminal episode was related to a small bowel perforation.

Autopsy revealed a widely disseminated neoplasm involving lungs, liver, kidneys, bowel, subcutaneous connective tissue, heart, and penis. A diffuse leptomenigeal infiltrate of the brain and spinal cord was noted.

Submitted are: 2 slides and 1 Kodachrome.