CASE 3

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The patient was born to a 20 year-old gravida I, para O, female after a full term gestation. The delivery was uneventful. However, the boy was not discharged from the hospital until 6 days of age because of several episodes of gagging and vomiting. A trachea-esophageal fistula was suspected but tests for this were negative. He was admitted to the hospital at 12 months of age with an upper respiratory infection. At this time he was noted to be hypotonic. The patient responded to antibiotic therapy and was discharged after several days. The child was next admitted at 20 months of age, again because of an upper respiratory infection. At this time he was unable to walk or talk and was thought to be developmentally delayed. A spinal tap showed an opening pressure of 350 mm of water. The fluid contained 60 mg. % protein, 4 WBCs and 232 RBCs. He responded to therapy and was discharged after two weeks in the hospital. Two months later he vomited and aspirated at home. The child was dead on arrival at the hospital. At autopsy, enlargement of the medulla and discoloration of the cerebellar white matter were noted.

<u>Submitted are:</u> Kodachrome transparencies and sections.