

CASE 1992-9

Submitted by: Nancy Tresser, M.D., Pierluigi Gambetti, M.D., Mark Cohen, M.D.,
Institute of Pathology, Case Western Reserve University School of Medicine,
University Hospital, Cleveland, Ohio 44106

CLINICAL ABSTRACT:

A 5 year old female, up to then in her normal state of health, was noticed to have subtle personality and behavioral changes. One month later she had a seizure, while at home, described by her mother as "jerking her head to the left and becoming unresponsive". She lost bowel control, and remained unresponsive for approximately 5 minutes. This was followed by a one hour period of confusion, headache and neck pain.

She was brought to the emergency room by her parents. Her examination was normal with no focal neurologic findings. Laboratory examinations were as follows:

Na 137, K 4.1, Cl 104, HCO₃ 22, BUN 6, cr. 0.7, Glu 95, HCT 37, Hgb 12.2,
WBC 14.5 (79% segs, 3% bands, 17% lymph., 1% monos), PLT 203

Serum Quantitative Immunoglobulins:

IgG 650mg/dL (550-1450)
IgA 57 mg/dL (28-140)
IgM 332mg/dL (40-220)

CT scan and MRI revealed a mass in the right parietal lobe.

A right parietal craniotomy for tumor was completed without complication.

She was discharged on post op day 7.

One year later she is reported to have behavioral problems at school and home. She is seizure free and without focal neurologic findings. Repeat CT scan is without evidence of residual tumor.

MATERIAL SUBMITTED: One H & E stained slide, one kodachrome (MRI).

POINTS FOR DISCUSSION: 1. Histogenesis of this lesion.
2. Relationship to meningiomas?