

CASE 1992-8

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CLINICAL FINDINGS:

This 58 year old, right-handed man presented with a 56 year history of epilepsy. The majority of his childhood seizures consisted in a sense that his eyes were being drawn to an object and the illusion that he was losing control of his head movements. Approximately 8 of these brief episodes occurred per month. They were never associated with loss of consciousness. At age 56 some of the ocular and head movement misperceptions began to be accompanied by changes in the patient's facial expression, followed by various random movements of the limbs that quickly merged into motor automatisms; for example, he would push an object around, such as a piece of furniture, usually for about 5 minutes, after which he recovered with no post-ictal weakness or aphasia. He was having 0-3 of these complex partial seizures/month.

He was a compulsive writer. His wife described considerable mood swings, including irritability, lack of ambition, low libido and depression, which were more of a problem than the seizures. His medications included primidone, phenytoin, desipramine, and, at some time in the past, possibly carbamazepine. Although his delivery was described as difficult due to "cephalopelvic" disproportion, his motor and psychological development was on schedule and he reached Grade 13 at school. He was particularly talented at music.

On physical examination at age 58 he had bilateral Dupuytren's contracture, marked phenytoin-induced hypertrophy of the lower gums and a slight, lop-sided, spontaneous smile, the left corner of the mouth being lower than the right. There were no other neurological findings.

A right sided, temporal, epileptic focus was shown in EEGs performed at age 58, 60 and 65. A normal CT scan was reported at age 59. MRI scanning was not carried out.

When last seen in the Neurology clinic at age 65, the incidence of his complex partial motor seizures was unchanged; he also described 4 or 5 "warnings"/month. Although he had been moderately depressed, his mood was normal. No new neurological signs were recorded.

The patient drowned at age 65, 4 months from his last clinic visit, while swimming with friends.

AUTOPSY EXAMINATION:

The general findings noted at the time of a Coroner's autopsy were consistent with asphyxia due to drowning. The fresh brain weighed 1370g. The right hippocampus was small and the distinction between the grey and white matter in the adjacent parahippocampal and occipitotemporal gyri was blurred. There were no other CNS abnormalities.

MATERIAL SUBMITTED: One hematoxylin, eosin and solochrome-stained slide of the right mesial temporal lobe structures.

POINT FOR DISCUSSION: 1) Classification of the lesion.