

CASE 1998-1

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CLINICAL HISTORY: This 50-year-old veteran, with a past medical history of hypertension, presented with recent onset of headaches, dysarthria, and right-sided weakness. A head CT scan, performed elsewhere, showed "tumor with edema", and the patient was transferred to the hospital. Head MR revealed a 7 cm left hemispheric mass within the left ventricle, possibly involving parenchyma on the left, and extending into the pineal recess and superior vermian cistern. The lateral ventricles were expanded. The tumor had an inhomogeneous signal, with interspersed hypointense areas on T2-weighted images, and uniform gadolinium-enhancement. Prominent vascular flow voids and mass effect were seen, also. Preoperative work-up disclosed a cyst in one kidney. The patient underwent gross total resection of the mass.

MATERIAL SUBMITTED: One H&E-stained glass slide, and one unstained glass slide (baked at 37C).

POINTS FOR DISCUSSION: Nosology, grading, and treatment recommendations for such tumors.