

47th ANNUAL DIAGNOSTIC SLIDE SESSION 2006

Case 2006-3

Submitted by:

Patricia A Kirby, M.D.

Matthew Karafin M3

Department of Pathology,

University of Iowa,

Iowa City, IA. 52242

Clinical History:

19 year old woman had traveled to South America in the past and to Africa recently on a 3 week mission. Five days after her return from Mozambique, she complained of headaches, flu-like symptoms and pyrexia. She took no medication and told her family she would “sleep it off”. There was initial improvement of her symptoms over a 24 hour period. However she become progressively somnolent and mildly jaundiced during the following 2 days and her family noted she had no urine output. She was taken to her local ER where a diagnostic procedure was performed. In view of her deteriorating mental status and poor renal function, she was transferred to UIHC.

Imaging studies reported cerebral edema with FLAIR and T2-weighted images showing diffuse hyperintensity in the cerebral white matter and the splenium of the corpus callosum. The gradient-echo study showed subcortical hypointensities in keeping with hemorrhage.

Her clinical course was complicated by anemia, thrombocytopenia, renal failure and progressive mental status deterioration. In spite of therapy, her EEG reported no cerebral activity 5 days after admission and her family elected to discontinue therapy.

Material submitted: Representative H&E section of cerebral cortex and white matter

Point of discussion:

1. Diagnostic features
2. Pathogenesis