## 52<sup>ND</sup> ANNUAL DIAGNOSTIC SLIDE SESSION, 2011

## CASE 2011-2

**Submitted by:** DRS. MARK SAMOLS, KARI-ELISE CODISPOTI, AND BARBARA J. CRAIN: Johns Hopkins University School of Medicine

DR. MARC K. ROSENBLUM: Memorial Sloan-Kettering Hospital

Clinical History: A 96-year-old female was enrolled as a control patient in the Huntington disease research study because one of her sons was diagnosed with Huntington disease. She had a history of hypertension, chronic obstructive pulmonary disease, and coronary artery disease s/p coronary artery bypass graft surgery 11 years prior to death. Two years prior to death, she was hospitalized with a urinary tract infection, and during this admission, she was diagnosed with mild dementia of the Alzheimer type with mild memory deficits. She progressed slowly until six months prior to death, when she developed a sharp decline in cognitive function. Three months later, she was unable to recognize family members and was only able to have limited, basic conversations. She died while in hospice care. Permission was obtained for a brain only autopsy.

**Autopsy Findings:** The brain weighed 1100 gm and showed moderate global atrophy. Coronal sections showed old lacunar infarcts in the left frontal white matter and in the left putamen. There were no neuritic plaques (CERAD age-related plaque score 0). Moderate numbers of neurofibrillary tangles were seen in the hippocampus and entorhinal cortex, consistent with a Braak score of II/VI.

**Material Submitted:** H&E section

**Points for Discussion:** 1. Diagnosis

2. Clinical presentation