

65th ANNUAL DIAGNOSTIC SLIDE SESSION 2024

CASE 2024-11

Submitted by:

Katelyn E Moss, DO, Carrie A Mohila, MD, PhD, Melissa M Blessing, DO
Department of Pathology and Immunology
Texas Children's Hospital / Baylor College of Medicine, Houston, TX

Clinical History:

The patient is a 13-year-old female status post liver transplant at age 3 years with complicated post-transplant course including posterior reversible encephalopathy syndrome resulting in focal epilepsy and several hospitalizations for encephalopathy in the setting of hepatic dysfunction. She presented to the emergency department in acute respiratory distress with substernal chest pain and hemoptysis. Chest computed tomography scan was concerning for pulmonary infection versus inflammation in the setting of hepatic decompensation. She rapidly deteriorated in spite of empiric treatment for infection and died within 48 hours of admission without definitive diagnosis or central nervous system (CNS) imaging.

Autopsy findings:

Diffusely congested, consolidated lungs and pleural effusions
Cardiomegaly and pericardial effusion
Cirrhotic liver, splenomegaly and ascites
Brain weight: 1,052 grams, no exudates or significant gross abnormalities

Material submitted:

1. Gross image of cerebrum
2. One (1) H&E-stained section from the pituitary gland
3. One (1) H&E-stained section from the frontal lobe

Points for discussion:

1. Histopathologic features and differential diagnosis.
2. Pathogenesis and clinical significance.