The diagnosis was **Neurothekeoma**. This tumor is of nerve sheath origin but is not associated with von Recklinghausen's disease. The cells are S-100 negative.


**CASE 2**

The diagnosis was **Pick's Disease**, electron probe analysis showed no evidence of mercury.

**CASE 3**

The diagnosis was **transverse myelitis due to Schistosoma mansoni**.


**CASE 4**

The diagnosis was **Sparaganosis** due to Spirometra.


**CASE 5**

The diagnosis was **Whipple's disease**. At autopsy, the lesions were confined to the brain.

CASE 6

The diagnosis was free-living amoebic infection. The organism was isolated in tissue culture in which it was cytotoxic. Injection intraventricularly, intraperitoneally, and intranasally in immuno-suppressed mice resulted in the death of most animals. There were no histopathologic changes but tissue cultures from these brains were positive. Immunoperoxidase stains with antibodies directed against various genera of amoebae confirmed that the organism belongs to the Acanthamoeba genus; however, the species is yet to be identified. Some observers thought that this was a dual infection.


CASE 7

Because of the absence of inflammatory changes this was not thought to be a form of allergic encephalomyelitis. A diagnosis of nonspecific toxic reaction was made.

CASE 8

There was no general agreement for a diagnosis. Some commentators felt that this was a combination of congenital malformations with a superimposed destructive process which could have been due to an intrauterine infection or ischemia. The presenters favored a congenital infection.

CASE 9

The diagnosis was primary leptomeningeal myxoma.

CASE 10

The diagnosis was ethylene glycol intoxication (oxalosis). The serum calcium fell from 9.5 to 7.9 mg%. A half full can of antifreeze was found in her home.

CASE 11

The diagnosis was methanol intoxication.