Case 1

The diagnosis was leptomeningitis due to Cryptococcus neoformans (with giant forms) and Prototheca wickerhamii. Although its occurrence in skin is well recognized, this is the first reported instance of an algal organism causing meningitis in the human. This organism was isolated from the central nervous system but not from any other organ at post mortem.


Case 2

The diagnosis was hemimegalencephaly. Several discussants reported favorable clinical results following surgical resection.


Case 3

The diagnosis was mucopolysaccharosis type VIB. (Maroteaux-Lamy syndrome).


Case 4

The neocortex showed spongiform change but the hippocampal formation was normal. Western blots prepared from frozen brain showed a positive reaction against an antiserum prepared from scrapie-infected hamster brain. This is characteristic of Creutzfeldt-Jakob Disease.


Case 5

The infiltrating cells were demonstrated by immunologic methods to be histocytes. The diagnosis was differentiated histiocytosis (histiocytosis x).


Case 6

The patient had a four year history of systemic lupus erythematosus. There was no evidence of residual tumor at autopsy and the heart was normal. The presenter’s diagnosis was multiple infarcts secondary to lupus vasculitis. Some observers doubted the presence of a primary vasculitis. There was no inflammation in the basilar artery.


Aisen AM, Gabrielson TO, McCune WJ. MRI of SLE involving the brain. AJNR 1985;6:197-201.

Case 7

The diagnosis was multiple sulphatase deficiency (mucosulfatidosis).


Case 8

Herpes simplex, type II was isolated from the rash. The same organism was demonstrated by immunologic methods and electron microscopy of the spinal cord. The diagnosis was acute necrotizing myelitis due to HSV II.

Wiley CA, Van Patten PD, Carpenter PM, Powell HC, Thai LJ. Acute ascending necrotizing myelopathy caused by Herpes simplex virus type II. Neurology (in press).

Case 9
The diagnosis was systemic Whipple's disease with skeletal muscle involvement. The patient had worked as a sales manager in the jewelry business. Exposure to mineral dusts might have contributed to impairment of macrophage function. He was HIV antigen negative.


Case 10
The histologic pattern of this tumor has been well recognized for many years and there is general agreement that it carries a good prognosis. The controversy has been in defining its histogenesis. The presenter showed clear electron microscopic evidence that the cells are of ependymal origin. The diagnosis was ependymoma, clear cell variant. One of the discussors cited a recent paper showing that childhood hemispheric gliomas which present as mural nodules have a good prognosis regardless of their histology.


Case 11
The diagnosis was kinky hair syndrome (Menkes' Disease)


Case 12
The diagnosis was multiple system atrophy (Shy-Drager syndrome).
