CASE 1993-3

Submitted by: Dr. Samuel K. Ludwin and Dr. David Hurlbut
Departments of Pathology, University of Western Ontario
and St. Joseph's Health Centre

Department of Pathology, Health Sciences Centre
University of Western Ontario


Clinical History: Following spontaneous rupture of membranes on October 15th, 1992 at 2250 hours, this male infant of 36 weeks gestation was delivered by caesarean section on October 16th, 1992 at 1610 hours. Caesarean section was performed because of a nonreactive nonstress test. The pregnancy for this 30 year old mother (TPAL 1001) was uneventful apart from decreased fetal movements. APGAR scores were 2, 3, 6 at 1, 5 and 10 minutes, respectively. The infant required resuscitation by the neonatal intensivists. He had multiple congenital anomalies including micrognathia, limb contractures and cleft palate. The infant was incubated and ventilated. Subsequent complete neurological examination revealed no spontaneous limb movements, and absent deep tendon reflexes. Echocardiography showed a large atrial septal defect. Following further investigations compassionate care was instituted. The baby died at 1610 hours on October 26th. Consent for a complete autopsy was obtained from the mother.

Necropsy findings: Atrial Septal Defect

Material submitted: 1 glass slide of basal ganglia

Points for discussion: 1. Diagnosis
2. Nosology
3. Is this all one disease?