43rd ANNUAL DIAGNOSTIC SLIDE SESSION 2002

CASE 2002 [1]

Submitted by: SAROJA ILANGOVAN MD, PETER PYTEL MD,
ROBERT WOLLMAN MD, MARC G. REYES MD, RAJESWARI CHANDRAN MD
Cook County Hospital, Hektoen Bldg, Dept of Neuropathology
627 South Wood St, Rm 423, Chicago IL 60612
and
University of Chicago, Dept of Pathology, MC 6101
5841 S. Maryland Ave., Chicago IL 60637

Case reference number: 1

Clinical History:
28 year old woman with history of polymyositis since 1995, readmitted to hospital in 1998
with complaints of easy fatigability, lower extremity weakness and episodes of falling down.
Patient is alert and oriented x 3, with normal sensory function and normal respiratory,
cardiovascular, gastrointestinal function.
Pertinent physical findings are slight muscle wasting of right calf 4/5, right and left deltoids
4/5, right biceps 5/5, left biceps 4/5, right triceps 4/5, left triceps 5/5, bilateral knee extensors
5/5, bilateral grasp strength 5/5, reflexes: bilateral biceps and triceps 2+, right/left patellar
1+/2+. Negative Babinski and Romberg sign. Nerve conduction study of lower extremities is
suggestive of right peroneal neuropathy and questionable bilateral S1 radiculopathy.
CPK level over 1000 IU on multiple occasions.

Necropsy findings: not applicable

Material submitted: Kodachrome slides of H&E right thigh muscle biopsy (1998) 4x, 10x

Points for Discussion:
1. Differential Diagnosis
2. Pathogenesis