

Canadian Association of Neuropathologists
L'Association Canadienne des Neuropathologistes

CASE No 5

N. Basahel¹, L. Macdonald², and D. G. Munoz¹

¹Department of Laboratory Medicine, ²Division of Neurosurgery, St. Michael's Hospital, University of Toronto, Toronto, ON

The patient was a 41 year old woman with a 20 year history of HIV infection, under antiretroviral treatment (Sustiva & Kivexa), with low CD3 and CD4 counts, but normal white blood cell counts, hemoglobin and platelets, and no evidence of opportunistic infections or other disease states suggestive of AIDS. She was also Hepatitis-C positive. She presented with a 3 day history of confusion, disorientation, and memory lapses, preceded by a few weeks' history of intense morning headache. On examination there were no focal neurological deficits. A CT scan showed a homogeneously enhancing deep frontal mass with subfalcine herniation.

The lesion was resected.

Materials submitted: one representative H&E slide

Questions: Diagnosis
 How does HIV status influence risk and treatment decisions?