

# Canadian Association of Neuropathologists

## L'Association Canadienne des Neuropathologistes

CASE No 9

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This 12-year-old boy initially presented to the Emergency Department with a sudden onset of left leg paresthesias, weakness and a mild foot drop; the clinical impression was that of a left peroneal neuropathy of unknown etiology. In follow-up with the outpatient Neurology Clinic, within one week's time, he showed clinical improvement and was back to his usual activities.

Seven weeks after his initial presentation, he presented to the Emergency Department with sudden onset of severe headache, vomiting, left hemiparesis and a decreasing level of consciousness. CT imaging of the head showed a large intraparenchymal hemorrhage in the right centrum semiovale with surrounding edema, midline shift and transtentorial herniation, necessitating an urgent decompressive hemicraniectomy. He remained unstable and 24 hours later, he required a second operation for evacuation of a hematoma and resection of an underlying lesion.

Materials: one representative H&E slide

Questions:    Diagnosis?  
                  Differential diagnosis?  
                  Additional special studies