

Canadian Association of Neuropathologists
L'Association Canadienne des Neuropathologistes

CASE No 9

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This 54-year-old woman had a history of seizures since the age of 11, consisting of complex partial seizures, occasionally generalizing to a convulsive grand mal type seizure. She was triparetic with little movement of her legs and right arm since a spinal cord injury in 1998 in the course of a seizure. In the six months prior to admission, she became less creative and artistic, and her personality changed developing aggressiveness. She complained of headaches with nausea and stopped being able to transfer into the wheel chair due to increased weakness. On exam, she was alert, but disoriented to place and time, and confabulated.

MRI showed a mass measuring 4.5 x 4 cm in the right middle fossa adjacent to the right sphenoid bone with mostly uniform enhancement. There was significant edema of the temporal lobe and linear enhancement within the Sylvian fissure adjacent to the lesion. On review of CT there were no changes in the adjacent bone.

At operation there was an arachnoidal plane, but only minor attachment to the dura through a few blood vessels. The dura itself did not appear to be abnormal.

The gross specimen was received in multiple fragments, which in aggregate measured 5 x 5 x 1.2 cm.

Material Submitted: 1. Hematoxylin and eosin stained section representative of major features of the mass.

Question: Differential diagnosis?