CASE 4

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A 56-year-old white male, never ill in his life, suddenly developed a confusional state, loss of memory, complete disorientation for time and place with a retrocession to a period of his life twenty to thirty years earlier. Neurological examination showed unequal pupils which reacted sluggishly to light; other than this the examination was entirely normal. Blood pressure: systolic 140, diastolic 70; pulse 76; weight 132 pounds. He was admitted to a psychiatric hospital with the admission diagnosis of an organic cerebral disorder. X-ray of the skull was reported as "Paget's disease." Laboratory studies: spinal fluid protein 86 mg. per cent; acid phosphatase 16.8; alkaline phosphatase 31.5; CSF pressure 135 mm. On the tenth day there developed two diopters of papilledema in the right disk, enlarged right pupil fixed to light stimulation, mild supranuclear weakness left side of the face, hyperreflexia throughout - greater on the left. Angiography was "normal." Air study revealed "dilatation of the lateral ventricles with no evidence of a space-occupying lesion." EEG showed " an abnormal EEG." He died quite suddenly, 33 days after onset of symptoms. At autopsy the skull was spongy in appearance and had a rarified structure. Thr brain weighed 1145 grams. Involving both lateral walls of the third ventricle there was a diffuse, pinkish-gray, granular, well-vascularized tumor mass which invaded the thalamus, subthalamic nuclei, red nuclei, substantia nigra and the internal portion of the pars basalis of the cerebral peduncles. There was a similar tumor mass extending from the inferior portion of the splenium of the carpus callosum to the middle portion of the hippocampal formation involving the floor of the occipital horn of the lateral ventricle, the inferior surface of the nucleus lenticularis and part of the internal capsule. The spinal cord was normal.