Case 1995-8

Submitted by:

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Case reference #NP92-324

Clinical History:

This 5-year-old girl was admitted to Loyola University Medical Center on 6/25/92 with the chief complaint of left-sided weakness.

History of Present Illness:

The child was healthy until three days prior to admission, when she vomited a couple of times. The parents felt that she had the flu until the day of admission when, while walking through the shopping mall, the mother noticed that she was dragging her left foot and had difficulty in walking. She was taken to her pediatrician, who confirmed the left-sided weakness and left facial droop. A CT scan was done at the outside hospital and the child was diagnosed as having a "brain tumor" and was subsequently transferred to Loyola.

Physical examination at the time of admission revealed a lethargic girl with bilateral papilledema and left central facial weakness. The left upper extremity was weak 3-4/5 and there was a positive Babinski on the left side. A repeat CT scan showed a 7 x 6 cm. enhancing mass in the right parietal area. The tumor was reported inhomogenous with calcification and necrosis in the center. At surgery, the tumor was focally attached to the dura. A "total" removal of the tumor was accomplished. The surgical specimen measured 7.5 x 6.5 x 5 cm. and weighed 80 g. The cut surface revealed the tumor to have a fleshy-tan scalloped periphery with pale yellow partly collapsed central areas of necrosis.

Follow-up:

She developed a recurrence of the tumor in November 1992 which was partly resected, and in January 1993 she had another recurrence in the same area. The family refused any further surgery, and she died on 1/27/93. A request for autopsy was not granted by the parents.

Material Submitted:

Hematoxylin and Eosin stained sections from the tumor.

Points for Discussion:

1. Diagnosis
2. Histogenesis