

A Case of Cerebral Tumour. By WM. LEONARD FORSYTH, M.B.,
Ch.B., Major I.M.S., Pathologist, East Sussex County Mental
Hospital, Hellingly.

A. J. A— was admitted to this hospital under Dr. J. Greene Nolan on March 4, 1925, suffering from what appeared to be confusional insanity.

Prominent in his case were periods of excitement with auditory and visual hallucinations. His pupils were equal and reacted to light, and a general survey of his condition revealed nothing unusual in this tentative diagnosis.

He was confined to bed, and on May 1, 1925, he developed a temperature of an irregular and low type, his pulse fluctuating between 104 and 130. The confusion deepened to stupor, which continued to his death on May 22, 1925.

Cerebro-spinal fluid taken on May 4, 1925, was clear and colourless, and showed a normal pressure, a normal protein content, a cell-count under 5 per c.mm., and an absence of pathogenic micro-organisms. Blood-cultures were sterile. A white blood-count numbered 6,000 per c.mm. A Widal was done against the *enterica* group with negative result.

The discs were examined by Dr. E. V. Oulton, ophthalmic surgeon, on May 5, 1925, with the report that the left disc showed blurring and hæmorrhages. He suggested the presence of tumour in the left occipital lobe.

Post-mortem examination of brain.—The dura and leptomeninges are normal and there is no excess of fluid. The right hemi-cranium is healthy. Section of the left shows a large area of rather recent hæmorrhage into the substance of the white matter of the left occipital lobe. This area is confined to the white matter of the lobe, and does not communicate with either the posterior horn or the descending horn of the lateral ventricle, or the exterior. The actual hæmorrhage is surrounded by the merest rind of pink white brain substance, suggesting rather a localized hæmorrhage than a tumour; the posterior cerebral artery carefully examined shows no apparent weak spot in the direction of aneurysm or rupture.

Sections were cut and establish the diagnosis of tumour in the left occipital lobe. This tumour is a perivascular endothelioma and is malignant. It is highly vascular, as most of them are; the capillaries are of recent formation and supported only by endothelium. The microphotograph shows its histology.

The interesting point of this case is the importance of ophthalmoscopic examination in cases showing the features of confusional insanity.

I am indebted to the Medical Superintendent for permission to publish the case.

A Case of Unilateral Hydrocephalus. By FRANK NORONHA,
M.B., C.M., D.P.M., Superintendent, The Asylum, Bangalore,
Mysore State, India.

A CASE of hydrocephalus, in many respects similar to the one described by Dr. Fred Wilson in the *Journal of Mental Science* for April, 1925, was also observed in the Asylum at Bangalore in December, 1924.