



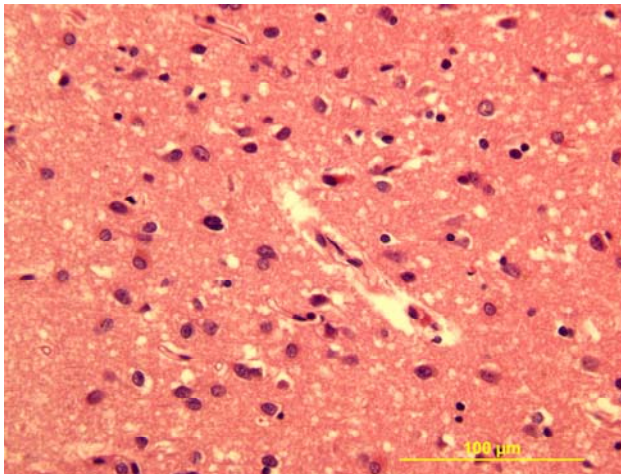
HOLY C.O.W.!

IT'S...

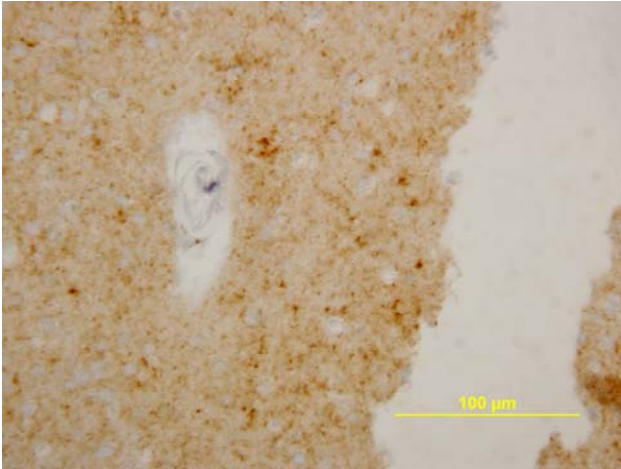
Clinical Question of the Week #2
July 7th, 2008 through July 14th, 2008

Please e-mail your answers to Kuo, Tim, Wendy, or Kevin (klian@mednet.ucla.edu; tprovias@mednet.ucla.edu; wsimon@mednet.ucla.edu; kbreger@mednet.ucla.edu) by 0800 on Monday, July 14th, 2008. The resident or intern with the most correct answers at the end of each month will receive a prize!

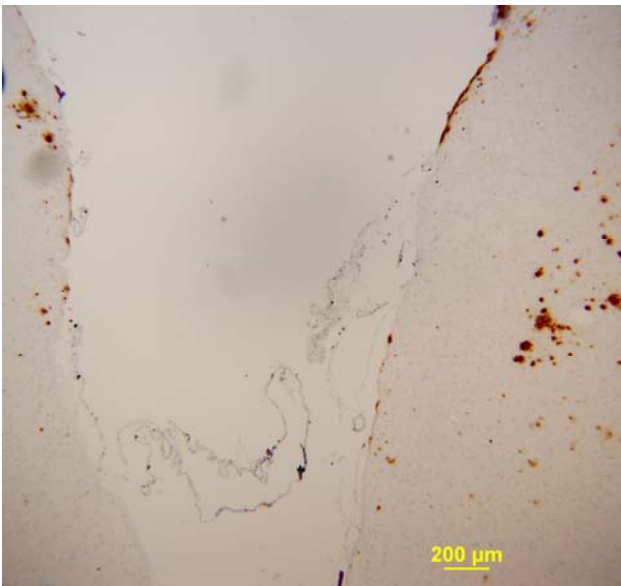
Case: A 78-year-old woman was brought in by her family for increasing confusion over the past few weeks. The family reports that she was in her usual state of health until two weeks ago, when she became disoriented. This was followed by memory loss, altered gait, and ultimately aphasia. On evaluation, she could not cooperate enough to follow commands, did not communicate, had unstable gait, but no sensory abnormality. She had not had any recent travel, sick contacts, fevers or chills. Initial laboratory evaluation and imaging were unrevealing. Despite all supportive measures, the patient's condition continued to deteriorate. Brain biopsy specimens are shown below.



Standard H&E staining of frontal lobe.



Immunohistochemistry stain #1 to frontal lobe.



Immunohistochemistry stain #2 to hippocampus.

Questions:

1. **What is the diagnosis?**
2. **What laboratory finding is found in association with this condition?**
3. **What is the protein that the immunohistochemistry stains are binding?**
4. **Who is attributed with discovery of this disease, and which institution is he from?**