

JANC/RA

9th January, 1968.

Dear Mr. Andrew,

re Mrs. _____, aged 39.
Ward E3

I have just been looking at the slides of the biopsy from this patient. It looks to me as if there are considerable numbers of abnormally large nerve cells scattered in a disorganised way throughout some gyri. I have not seen any obviously abnormal glia but the condition that springs to mind is tuberous sclerosis. Is there any suggestion at all of this either in the patient or in the family?

By a strange coincidence I am now working on this very problem with Murray Falconer and David Taylor, his assistant. Over the years we have turned up five or six rather similar specimens which range from almost certainly tuberous sclerosis to neuronal abnormalities very like this patient. They were, of course, all epileptic but I do not think any of them have shown conclusive other evidence of tuberous sclerosis. Perhaps we could have a few minutes discussion on this next Monday when I am at Oldchurch if you are also there.

I will of course be doing a lot more on the specimen in due course but I thought I should get in touch as soon as possible about the way it looks to be going.

Best wishes,

Yours sincerely,

J.A.N. Corsellis.

John Andrews, Esq., F.R.C.S.,
Oldchurch Hospital,
Romford.

REGIONAL CENTRE FOR NEUROLOGY AND NEUROSURGERY

OLDCHURCH HOSPITAL,
ROMFORD,
ESSEX.

TELEPHONE:
ROMFORD 46090

January 26th 1968.

Dr. J.A.N.Corsellis.
Department of Neuropathology.
Runwell Hospital,
The Chase, Wickford.
Essex.

Dear Dr. Corsellis,

Mrs. _____, aged 39.

We have received the following information from Severalls Hospital, regarding this lady's family history:-

"Mother, _____ was in mental hospital
"several times in Gottingen and a maternal aunt had fits
"similar to Mrs. _____, about 15 years ago."

Mrs. _____ has had no fits at all since operation,
when the supero-lateral part of her frontal lobe was excised.

Yours sincerely,

Hera Willcox (Mrs.)
Secretary to Mr. John Andrew.

JANC/RA

15th February, 1968.

Dear Dr. Fox,

re Mrs.

Mr. Andrew gave me a fragment of frontal lobe to examine which was removed from this patient a few weeks ago. I believe he has been in touch with you since about the findings. Very briefly, the main abnormality is one of an abnormal population of giant nerve cells restricted to one particular gyrus. This is to some extent reminiscent of tuberous sclerosis.

I am particularly interested in this kind of abnormality because I have now seen about half a dozen similar biopsy specimens from epileptic patients in which the question of tuberous sclerosis inevitably arises but in whom there is little or no other evidence of the condition. I notice from Mr. Andrew's letter that you had let him know that the mother of Mrs. _____ was in a mental hospital in Göttingen and that an aunt also had fits some years ago. Do you think there is any conceivable chance of my finding out more about these people? If you could give me any lead to work on I would be immensely grateful. Incidentally do you know whether Mrs. _____ has any of the skin lesions or other stigmata associated with tuberous sclerosis?

Sorry to bother you like this. Best wishes,

Yours sincerely,

J.A.N. Corsellis.

Dr. R. Fox,
Severalls Hospital,
Colchester, Essex.

RF/CRP

19th February, 1968.

Dear Dr. Corsellis,

re: _____

Thanks for your letter of February 15th.

I can't find anything about the background here other than that mother was in mental hospital in Göttingen on several occasions about 15 years ago, under the name of . I understand that there is only one big mental hospital there. Mrs. . has no idea why mother needed to go in (she is pretty dim). A maternal aunt is alleged to have had fits similar to Mrs. 's., but there is no knowledge of her being treated in hospital.

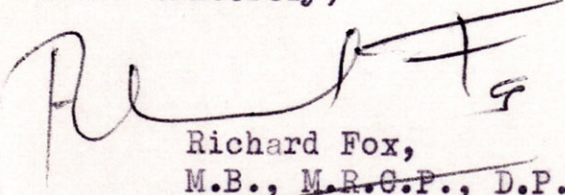
I suppose a letter to the medical superintendent at Göttingen would be followed up with typical Teutonic thoroughness?

According to the social history taken in 1958 from the husband, father died aged 54 from dropsy, mother was then 53, alive and well, three sisters were living and healthy, and one of three brothers had died at birth, cause unknown, the others being living and well. The parents were not related by blood.

On examination Mrs. . does have an acneiform tendency but no adenomous sebaceum and though not bright, is certainly not intellectually defective. I must confess, however, that I have not scrutinised her body surface with immaculate care. Would you like to see her yourself, or have one of your colleagues see her, or have our local skin specialist see her?

Yours sincerely,

Dr. J. A. N. Corsellis,
Runwell Hospital,
Nr. Wickford,
Essex.


Richard Fox,
M.B., M.R.C.P., D.P.M.,
Consultant Psychiatrist.

IANC/RA

22nd February, 1968.

Dear Dr. Fox,

Very many thanks for being so helpful about
. I will try and get in touch with the hospital
at Göttingen and see if they can help. I will let you
know what turns up. If you could get your skin specialist
to have a look at her some time I would be very interested
to know what he thinks.

It is conceivable that one day David Taylor, who is the
clinician particularly interested in these cases, might
also ask to have a look at her. At the moment he is
working in Oxford and I do not see very much of him.

Again very many thanks.

Yours sincerely,

J.A.N. Corsellis.

Dr. Richard Fox,
Severalls Hospital,
Colchester, Essex.

ESSEX COUNTY HOSPITAL, COLCHESTER

Telephone : Colchester 77341

Dr. R. Fox,
Consultant Psychiatrist,
SEVERALLS HOSPITAL.

9th May, 1968.

MAS/MD/129644

Copy to Dr. J.A.N. Corsellis.

Dear Richard,

re: Mrs. . 36 years.
13, Avenue, Colchester.

Thank you for your letter about this patient. In brief I do not think there is sufficient evidence from the Dermatological point of view to say that she has adenoma sebaceum, or other evidence of tuberous sclerosis. She does have an acneiform papulo-pustular rash chiefly on the chin but it appears to be an ordinary rather late acne in a fairly typical distribution and as you say not at all characteristic of adenoma sebaceum. She has keratosis follicularis, chiefly on the upper arms and thighs, which I think is non-specific, a scar on the left shoulder probably from a fall during a fit, and scars of her shingles on the right side of her trunk. She does have a slight thickening, or swelling, of the nail fold of the nail fold of the left little finger but I do not think I can really call this a para-ungual fibroma at the moment.

Negative findings, some of which she should have to substantiate a diagnosis of tuberous sclerosis, and which she does not have, are any shagreen patches, patches of leucoderma, a history of jack-knife fits when she was a child, eye changes, typical proper para-ungual fibromata with ridged nails or typical adenoma sebaceum.

I think the nearest one can go at the moment is that she may be a form of very *fruste* of adenoma sebaceum but one could not go further than that.

Yours sincerely,

Michael

M.A. SMITH.

Copies to Dr. N.L.Parks,
Dr. Corsellis.

JANC/RA

13th May, 1968.

Dear Dr. Smith,

Very many thanks indeed for your detailed report on Mrs. . It is a most intriguing problem because we have now got several biopsy specimens in which the question of tuberous sclerosis has arisen but on going back to the patients there is either none or very little clinical evidence of this condition.

Very many thanks for your help.

Yours sincerely,

J.A.N. Corsellis.

Dr. M.A. Smith,
Essex County Hospital,
Colchester.

JANC/RA

13th May, 1968.

Dear Dr. Fox,

re Mrs. _____.

I have just got the copy of Dr. Smith's report on Mrs. _____ and I really am most grateful to you for arranging this. I have written off to Germany and I hope that Göttingen will eventually come up with something. I have got as far as the University Clinic there at the moment.

Dr. David Taylor, who I may have mentioned before, is particularly interested in the clinical aspects of the problem of the boundaries of tuberous sclerosis and said he would very much like to see Mrs. _____ one day. I suggested that perhaps we could both come over to Severalls during the summer as you had said you would have no objection to this. I will be in touch with you again to try and fix something up.

Again many thanks,

Yours sincerely,

J.A.N. Corsellis.

Dr. R. Fox,
Severalls Hospital,
Mild End, Colchester.

From: Dr. RICHARD FOX, SEVERALLS HOSPITAL, COLCHESTER, ESSEX
TELEPHONE: COLCHESTER 77271

Ref: RF/PW

15th May, 1968

Dr. J. Corsellis,
Runwell Hospital,
Near Wickford,
Essex.

Dear Dr. Corsellis,

Re: Mrs.
13 Avenue,

Thanks for your letter of May 13th. You are of course very welcome to see Mrs. any time you wish.

I suggest the best thing might be if you were to arrange this with her direct and call on her at home. Or, as she is not a brilliant correspondent, it might be even better if you were to arrange the interview with the Health Visitor who has most contact with Mrs. , viz Mrs. Footner who can be contacted c/o the Public Health Department, East Lodge Court, High Street, Colchester. 79411.

Yours sincerely,



Richard Fox,
M.B., M.R.C.P., D.P.M.,
Consultant Psychiatrist

Let me know when, &
I'll try to get along.

From: Dr. RICHARD FOX, SEVERALLS HOSPITAL, COLCHESTER, ESSEX
TELEPHONE : COLCHESTER 77271

SS/PW

15th June, 1968

Dr. Corsellis,
4, The Green,
Writtle,
Chelmsford

Dear Dr. Corsellis,

Re: Mrs. _____
13 _____ Avenue,

Further to your telephone conversation with Dr. Fox re a visit to the above-named, I shall meet you and Dr. Taylor at Mrs. Fervis's home at 10.45 a.m. next Tuesday, 18th June.

Instructions to get to Mrs. _____'s home are as follows:
turn right at traffic lights at _____, into _____ Road.
Cross straight over _____ Road at the end of
Road into _____ Road. _____ Avenue is the first turning
left.

Yours sincerely,

Shirley Spooner

Shirley Spooner (Miss)
Social Worker

JANC/RA

20th June, 1968.

Dear Dr. Fox,

Perhaps Miss Spooner has told you that we met at Mrs. 's home the other day and we are most grateful to you for making this possible. It was very helpful to see her and although I suppose the time is still relatively short, she seems to have done remarkably well so far.

Dr. Taylor and I did wonder whether you could let us borrow her Severalls records for a few days?

Best wishes,

Yours sincerely,

J.A.N. Corsellis.

Dr. R. Fox,
Severalls Hospital,
Colchester, Essex.

Records Office,
Severalls Hospital,
Colchester, Essex.

9th July, 1968

Dear Dr. Corsellis,

re: Mrs.

Our records show that the case notes of the above-named patient, which were posted to you on 21st June, 1968 do not appear to have been returned to us. Your help in this matter would be much appreciated, as Mrs. _____ is attending the out-patient clinic.

Yours faithfully,

H. Fitz Gerald

Medical Records Officer

Dr. J. A. N. Corsellis,
Department of Neuropathology,
Runwell Hospital,
Nr. Wickford,
Essex.

retd. by
Recorded delivery
11/7/68

JANC/MC

17th July, 1968

Dear Dr. Fox,

Mrs.
13 Avenue,

I am afraid I am being a frightful pest about Mrs. . Would it be conceivably possible to have her tested psychologically, or do you think there is no point in this?

My reason for asking is that we have information about the verbal performance and full scale I.Q.s of the other five similar patients, and it would round it off rather nicely if we could get this for Mrs. as well. If you think it justifiable and it is not causing too much trouble, we would very much appreciate it.

Yours sincerely,

J. A. N. Corsellis

Dr. Richard Fox,
Severalls Hospital,
Colchester, Essex.

From: Dr. RICHARD FOX, SEVERALLS HOSPITAL, COLCHESTER, ESSEX
TELEPHONE : COLCHESTER 77271

RF/PW

20th August, 1968

Dr. J. Corsellis,
Runwell Hospital,
Near Wickford,
Essex

Dear Dr. Corsellis,

Re: Mrs.
13 Avenue,

Enclosed is a copy of the results of the investigations made on Mrs.

Our senior psychologist, Dr. Drabkova, who did the investigations, has some difficulty with her English, and if you would prefer one of your people to check the results, I have no objection.

Yours sincerely,

Richard Fox

Richard Fox,
M.B., M.R.C.P., D.P.M.,
Consultant Psychiatrist

Full Scale WAIS

Tests Used : WAIS /10 subtests, full Scale/

Behaviour : From the beginning she complained of a bad memory :
 ----- "Since a brain operation I cannot remember anything."
 At the beginning my impression was that she tried to make her troubles worse than they are. But later I knew, that she rather wanted to mask her real low abilities. However, her memory was not worse than the other abilities .

WAIS:

Mrs. 'general intelligence level is IQ = 58 which puts her into the range of mental defective. All her abilities are in this range. But some of them are worse, she did not fulfil any task from the subtest Similarities and Arithmetic. She could not recognise any similarity between orange and banana, between a lion and a dog, she was not able to comprehend the simplest relations between things. She could not fulfil the simplest arithmetic tasks as addition and subtraction. It is probable that her praemorbid intelligence was low, especially in verbal area.
 Her verbal score now is near the imbecilitas /IQ = 53 / , nonverbal score is higher /IQ = 70/, and we can judge that her practical intelligence is higher than the verbal intelligence, especially abstract thinking.

Conclusion : Mental defective .

	Scaled score	
The whole scatter :	Information	4
	Comprehension	3
	Arithmetic	0
	Similarities	0
	Digit Span	4
	Digit Symbol	4
	Picture Completion	3
	Block Design	7
	Picture Arrangement	6
	Object Assembly	3
	Verbal score	13 ... IQ = 53
	Performance score	23 ... IQ = 70
	Full Scale score	36 ... IQ = 58

8th srpna 1968
 8th August, 1968.

Dr. Hana Drábková
 Dr. Hana Drábková
 Senior Clinical Psychologist

JANC/RA

21st August, 1968.

Dear Dr. Fox,

Once again very many thanks for getting Mrs. tested. I must admit as a complete outsider I would have thought her I.Q. was higher than 58 and perhaps, as you suggest, there was some difficulty with the language.

Anyway very many thanks for taking so much trouble.

Yours sincerely,

J.A.N. Corsellis.

Dr. Richard Fox,
Severalls Hospital,
Colchester, Essex.