

**CODE:** TX600 M7100

**ID NOS:** HX92798 A15201

**DIAGNOSIS:** ALCOHOLIC DEGENERATION OF CEREBELLUM

**CLINICAL HISTORY:** M/59. This patient had a long history of alcoholism and abnormal gait with ataxia, thought to be due to cerebellar degeneration, for at least eight years. He died of carcinoma of the lung and his liver was not cirrhotic.

**MACROSCOPIC:** The pons and cerebellum have been bisected down the midline to show conspicuous atrophy of the folia of the anterior vermis of the cerebellum. This becomes obvious when compared with the plump folia of the posterior portion. There is no recognisable abnormality of the cerebellar hemisphere seen on the reverse.

**MICROSCOPIC:** Comparing the abnormal (left) with the normal (right), it can be seen that in the former the cellularity of the granular layer is reduced and very few, if any, Purkinje cells persist.

