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1: [Clin Neuropathol](#). 2009 May-Jun;28(3):165-7.

Glioblastoma multiforme with an unusual location and clinical course.

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We present a unique case of a brain tumor patient with atypical location and progression. He was initially presented with mood and anxiety type symptoms together with aphasia and left-sided paraesthesias. Magnetic resonance imaging and CSF were negative and the patient was diagnosed with PTSD as he recently experienced a small motor vehicle accident. Two months after the first presentation, MRI revealed multifocal juxtacortical, leptomeningeal hyperdensities in the bilateral frontal lobes. MRI-guided frameless stereotactic biopsy defined a diagnosis of GBM 1 week prior to death which occurred within 4 months. Postmortally, formalin-fixed brain demonstrated that the main tumor mass was located in the fornix, infiltrating the ventricular system and disseminating over the cortex, cerebellum and spinal cord. The authors recommend closer scrutiny of psychiatric patients presenting CNS symptomatology, negative MRI, CT and CSF.

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