

Schlosser's brain tumor is inoperable

Lawyer, experts debate whether it played a part in child slaying

By JENNIFER EMILY
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No one knew during Dena Schlosser's capital murder trial that she had a life-threatening tumor at the base of her skull.

Jurors heard about a "shadow" on a scan of her brain, but neither doctors nor her attorneys realized the seriousness of what they now know is an inoperable brain tumor.

Ms. Schlosser's attorney, David Haynes, said the tumor on her pituitary gland could have contributed to her hallucinations the day she severed her baby's arms at the shoulders.

"Could this be related to Dena's actions on Nov. 22, 2004? I think so, but there is no way to prove it for sure," Mr. Haynes said. "Looking back on it now, it would have been great if we could have had this for the trial."

It is uncertain whether Ms. Schlosser had the tumor when she killed 10-month-old Maggie Schlosser with the largest knife in the kitchen at the family's Plano apartment.

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Dena Schlosser

Brain tumor news puts new focus on Schlosser case

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The case ended in a mistrial after jurors deadlocked 10-2 in favor of not guilty by reason of insanity, eventually leaving the decision to state District Judge Chris Oldner.

The judge heard the new evidence about the tumor last week and will announce a verdict in the second trial Friday. The judge can find Ms. Schlosser guilty and send her to prison for life, or not guilty by reason of insanity and send her to a state mental hospital until he agrees she should be released.

To prove insanity in Texas, the defense must show Ms. Schlosser had a mental disease or defect that caused her not to know right from wrong. Three psychiatrists testified during the first trial that they believed Ms. Schlosser was insane when she killed Maggie.

Hallucinations

McKinney neurologist Paul Flavill, who examined Ms. Schlosser after her trial and studied images of her brain, said mid-brain injuries can cause visual hallucinations.

Ms. Schlosser, diagnosed with postpartum psychosis and depression after Maggie's home birth, experienced religious hallucinations and delusions. She told psychiatrists she believed God wanted her to cut off Maggie's arms, as well as her own arms, legs and head.

Other hallucinations include a black dog chasing her, bloody streets turning into prophets that told her the end of days was coming and believing a little boy was Jesus.

But neurosurgeon David S. Baskin of the Methodist Neuro-

logical Institute in Houston said a brain tumor on the pituitary gland could cause agitation, confusion and disorientation, but probably not the complex religious hallucinations Ms. Schlosser experienced. The pituitary gland is at the base of the skull and controls the release of hormones to the body.

"It's unlikely the pituitary tumor could cause this type of heinous behavior," Dr. Baskin said. "But obviously, we don't know all the facts. ... It doesn't mean it isn't possible."

Dr. Baskin, who has performed 2,300 surgeries on pituitary gland tumors, said he has not seen any violent hallucinations associated with such tumors in his 28 years in medicine.

Delayed diagnosis

Ms. Schlosser's attorney said a number of events delayed Ms. Schlosser's diagnosis.

Ms. Schlosser's brain was originally scanned in April 2005, according to a medical report. This was done at Wilbarger General Hospital while she was a patient at the state hospital in Vernon, doctors worked to restore her to



competency.

The state hospital psychiatrist ordered a follow-up scan, but Ms. Schlosser was found competent and returned to the Collin County Jail before it was done.

A neurologist hired by the defense examined Ms. Schlosser and said she did not show any physical symptoms of a brain tumor. However, he asked to see the "shadow"

on the brain scan to make sure. The neurologist died before he saw her scan results. The doctor had not dictated his notes about Ms. Schlosser's case, and his staff could not find his notes.

"The doctor said there were no symptoms," Mr. Haynes said. "He said if she did have a brain tumor, it wouldn't make her violent."

Mr. Haynes said there was no time to seek the help of another doctor before the trial.

The Collin County Jail psychiatrist currently treating Ms. Schlosser did not know about the shadow until about three weeks ago because the report was locked in a drawer of her assistant, Mr. Haynes said.

The jail psychiatrist ordered the newest scan last month. The shadow seen on the first scan was a tumor. Dr. Flavill said there was no obvious change in size between the two scans.

An earlier injury

Ms. Schlosser has a history of brain injuries going back to childhood, according to trial testimony and her family.

She was diagnosed with hydrocephalous — commonly called water on the brain — as a child a year after she hit her head when falling

from monkey bars. She underwent more than 10 surgeries in which holes were drilled into her skull. Doctors also put in a shunt to alleviate fluid buildup in the brain.

No prognosis has been made for how long Ms. Schlosser might live, and she is not receiving treatment for the tumor. Surgery is not

an option.

"This thing is going to kill this woman," Mr. Haynes said. "The tumor will lead to paralysis, and

then she'll die."

Mr. Haynes said Ms. Schlosser is aware of the brain tumor and handling it "relatively well."

It's not the first time Ms. Schlosser has been told she has a tumor. As a child, doctors incorrectly diagnosed her with a fatal brain tumor instead of hydrocephalous.

"She said, 'Look, they told me when I was 8 years old that I had an inoperable brain tumor,'" Mr.

Haynes said.

Ms. Schlosser is not yet showing many physical symptoms related to the tumor, according to those who examined her. She has not had any headaches but does have weakness on the left side of her body, as well as clumsiness. She broke her right foot last year in jail when she fell while making her bed.

Dr. Flavill says Ms. Schlosser's speech is clear and her vision is

20/20. She has a small tremor in her handwriting. He recommends repeating the brain scan in a year to determine whether the mass has changed.

"Treatment is limited for a tumor in this location," Dr. Flavill wrote. "If deficits were worsening or the mass appears to be increasing in size, radiation therapy would be a consideration."

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