Brain Tumor

Introduction

meninges ← أو من الـ Tissue بطلعوا من نفس

- Primary brain tumors are a diverse group of neoplasms arising from different cells of the central nervous system.
- Approximately **one-third** of primary brain tumors were **malignant.**
- 20% of all brain tumors - **tumors of childhood.**
- **Malignant brain tumors** more frequent in childhood than in adults.

brain tumor عند الأطفال بكون malignant > عند الـ adult

Etiology of B

- **Genetic predisposition.**
- **Ionizing radiation.**
- **Viral infections:** Epstein-Barr virus → primary brain lymphoma.
- **Environmental risk factors:** pesticides, chemicals.
- **Possible causative factors include:** allergies, physical, trauma, and certain infections.

Epidemiology

- **Incidence:** 8-25 per 100,000 persons.
- **Metastasis:** 25% of all brain tumors. ← lung cancer خاصة من الـ
- **Race:** **whites** have a higher incidence of malignant brain tumors compared to **blacks.**
- **Gender:** there is a slight **male** predominance.
- **Age:** a peak incidence of all primary brain tumors around **age 45-50.** * بيجبوا أبكر عادي
- **Glioblastoma:** rarely occurs before the age of 15.
- **Medulloblastoma:** is uncommon after the age of 20.

< Childhood عشان بتيجي

Glioblastoma من

Classification of Brain Tumors

1. Primary or secondary (metastatic).
   ↳ lung, liver
2. Location. prostate, thyroid
3. Tissue of origin ← بعد مناخذ Biopsy
4. Grading: microscopic appearance.

* عرض الكتور Case أول سلايدة ||

← 62y ♀ ، الها اسبوعين

بتقدرش تحرك الـ object (سنيم)

و آخر ٣ أيام حس Rt hand weakness

Rt arm paresis , motor aphasia لسه,

ECG : sinus rhythm normal

X-ray , Blood test normal , ↑ deep tendon reflex

Progressive ؛ الحالة زي ملاحظين

sudden حاجة حصلت .

// Brain CT علينا

في mass عليها Compression

في Cortex و في الـ IF. lateral ventricle

(finger like edema)

suspect tumor ←

نضيف Contrast ، هلاقي الـ mass

بيتي contrast الـ بتنشف

(Brain tumor)

WHO Classification of Brain Tumors - 2007

1. Tumors of neuroepithelial tissue.
2. Tumors of cranial nerves.
3. Tumors of the meninges.
4. Lymphomas & hematopoietic neoplasms.
5. Germ cell tumors.
6. Tumors of the sellar region. → pituitary gland tumor
7. Metastatic tumors.

Classification of Primary Brain Tumors According to Histopathology

- **Astrocytic tumors:** Astrocytoma, Glioblastoma.
- **Oligodendroglial tumors:** Oligodendroglioma.
- **Ependymal tumors:** Ependymoma.
- **Choroid plexus tumors:** Choroid plexus papilloma, choroid plexus carcinoma.
- **Neuronal and mixed neuronal-glial tumor:** Ganglioglioma.
- **Embryonal tumors:** Medulloblastoma.
- **Germ cell tumors:** Germinoma, teratoma.
- **Menigeal tumors:** Meningioma .
- **Tumors of cranial and paraspinal nerves:** Neurinoma or neuroma (Schwannoma), Neurofibroma.
- **Mesenchymal tumors:** Lipoma (benign), angiolipoma, liposarcoma (malignant), fibrosarcoma, rhabdomyoma, rhabdomyosarcoma, chondroma, chondrosarcoma, osteoma, osteosarcoma, hemangioma, angiosarcoma.

benign ↓ malignant ↓

malignant كل الـ Tumor ← **Glioma**

more benign الـ ... Grade ①

- Gliomas account for over **80%** of primary CNS malignancies.
- The term "glioma" refers to tumors believed to be derived from glial cells.
- For definitive diagnosis, biopsy needed.
- **Gliomas are grossly devided to:** حسب Biopsy ✓
  - ✓ Low grade gliomas.
  - ✓ Intermediate grade.
  - ✓ High grade gliomas (more malignant).

Meningioma

ورم حميد

- 15% of brain tumors.
- Slow growing tumor, usually benign.
- **Common locations:** parasagital, hemisphers convexity, sphenoid, olfactory groove, sella turcica, cerebello-pontine angle.

facial hemispasm ✓ اجت ♀ للدكتور بـ 27 y
Cale ← جهة وحدة ← involuntary deviation ← الـ
(cerebello-pontine angle meningioma) / بالآخر

Grade 1 → Pilocytic astrocytoma

low grade, well differentiated

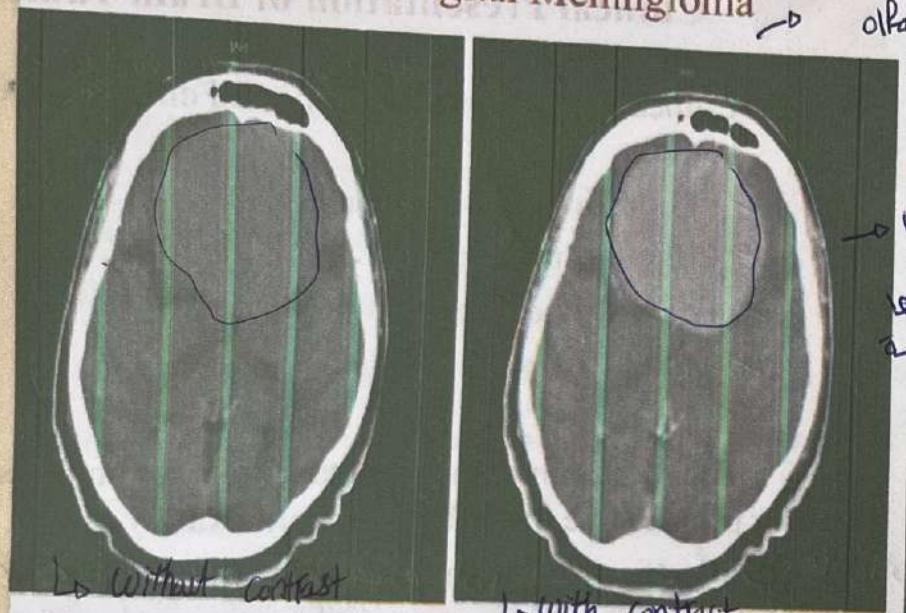
Grade 2 → Diffuse astrocytoma

intermediate grade, moderately differenti-

Grade 3 → anaplastic astrocytoma

high grade, Poorly differentia-.

Large Parasagital Meningioma



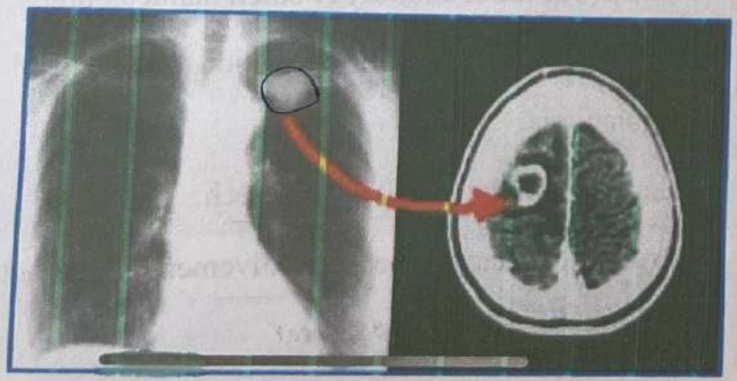
Metastatic Brain Tumors

"Secondary Brain Tumors"

- **15-30%** of cancer patients develop cerebral metastasis.
- **80%** of metastasis located in cerebral hemispheres.
- **16%** of metastasis located in cerebellum.
- **Median survival** with maximum treatment 8 months.

Route of Metastatic Spread

- Usually hematogenous.
- Sometimes local extension.



Brain Metastasis

Originate from malignant tumors located primarily in other organs:

- **Lung:** small cell carcinoma → most common
- **Breast:** breast carcinoma.
- **Kidneys:** hypernephroma.
- **Skin:** malignant melanoma.
- **GIT:** colon carcinoma
- **Thyroid gland.**
- **Gynecologic tumors:** ovarian carcinoma.
- **Prostate.**

Sources of Cerebral Metastasis in Adults

Primary	%
➢ Lung	44 %
➢ Breast	10 %
➢ Kidney	7 %
➢ GIT	6 %
➢ Melanoma	3 %
➢ Undetermined	10 %

malignant cell اكتر مكان بيصور to brain ..

Clinical Presentation of Brain Tumors

- Clinical presentation depends and differs according to the:
  - Location of the tumor.
  - Type of the tumor.
  - Size of the tumor.
  - Stage of the tumor.
- The most common presentation of brain tumors is progressive **neurologic deficit, usually motor.**

* ممكن يكون اول شي شعر شخص عنده الورم لكنه مش كتير ، فيأة الورم hemorrhagic CVA دة تزف فيجي الحياه بأزاحه

Clinical Presentation Signs & Symptoms

قبلها بيجوا ب

- **Nonfocal or Generalized**
  - Headache,
  - Seizures,
  - Nausea, vomiting,
  - Depressed level of consciousness,
  - Cognitive impairment.
  - Papilloedema
- **Focal Neurologic Deficit** حسب مكان الورم
  - Weakness,
  - Sensory loss,
  - Speech difficulty: dysarthria or aphasia,
  - Hearing dysfunction,
  - Visual dysfunction.

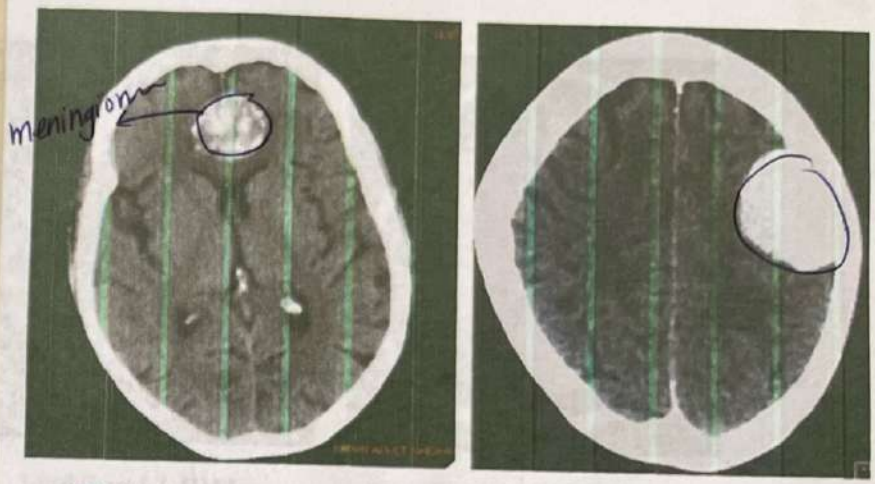
Focal Neurologic Deficit

- **Frontal lobe:** hemiparesis, personality changes, expressive aphasia., epilepsy , convulsion , depression
- **Parietal lobe:** contralateral sensory loss, asteriognosis. لقدرش يعرف الاشياء باللمس وهو مغمض
- **Temporal lobe:** auditory & smell hallucinations.
- **Occipital lobe:** visual hallucination, contralateral hemianopia,
- **Cerebellum:** ataxia, slurred speech.
- **Brain stem:** cranial nerve involvement, long tract abnormalities. , ocular symptom bulbar // , loss hear

Diagnostic Procedures

- **Chest X-Ray.**
- **CT:** neck, chest, abdomen, pelvis.
- **Stool analysis:** for occult blood.
- **Mammogram:** in women. → ± Breast Cancer
- **Brain CT:** with and without contrast.
- **Brain MRI:** with and without contrast. → sensitive أكثر
- **Positron Emission Tomography (PET):** for small malignancies detection.
- **Biopsy.**

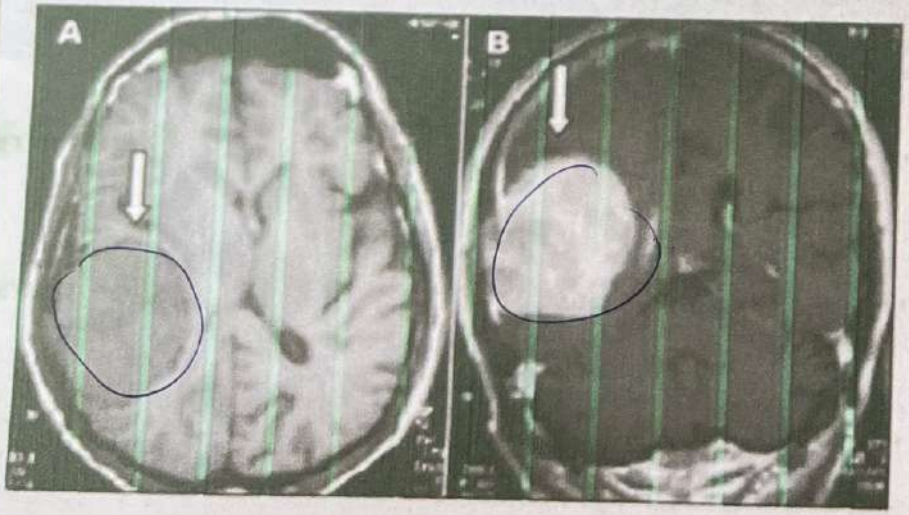
Meningioma - CT



CT without contrast: Calcified Falx Meningioma

CT with contrast: Meningioma Convexity

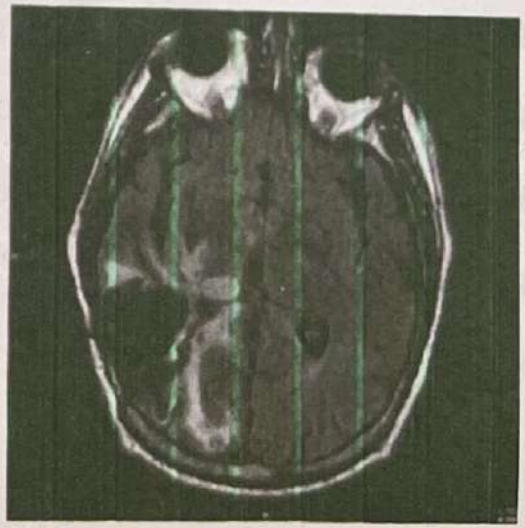
Meningioma - MRI



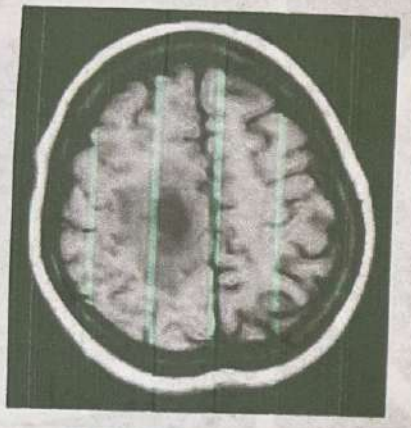
Axial T1 weighted MRI without contrast

Coronal T1 weighted MRI with contrast

Glioblastoma Grade IV



Astrocytoma



MRI T1 weighted



MRI T2 weighted

حواليها edema Vasogenic [Finger like appearance]

Management of Malignant Brain Tumors

- Surgery.
- Stereotactic radiosurgery: Gamma Knife Surgery.
- Radiotherapy.
- Chemotherapy.
- Conservative therapy: analgesics, steroids, manitol, AED, antiemetics.
- Combine therapy.
- Medical rehabilitation and physiotherapy.



Gamma Knife Surgery

anticipleptic

Roles of Radiotherapy in Brain Tumor

- **Incomplete surgery.** الجراح ما شاله كل الورم فنبحكله بالاشعاع
- **Deep brain tumor:** midbrain, pons. الورم deep ش عادر يوصله الجراح حـ
- **Radiosensitive tumor:** medulloblastoma.
- **Pituitary adenoma.** لـ تستجيب للاشعاع
- **Palliation:** metastatic lesions.

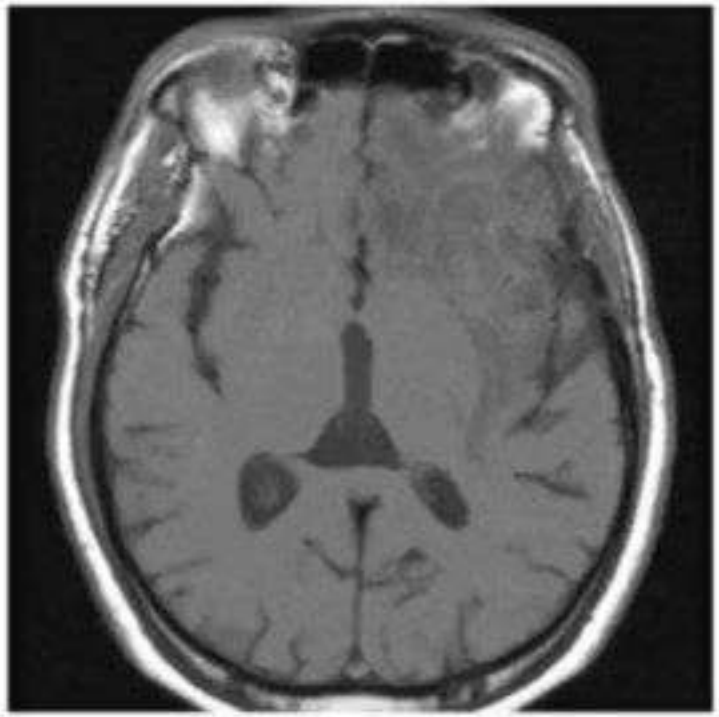
Lo ↓ growth rate ∂ tumor

↑ survival rate يعيش سنة بدل 8 شهور

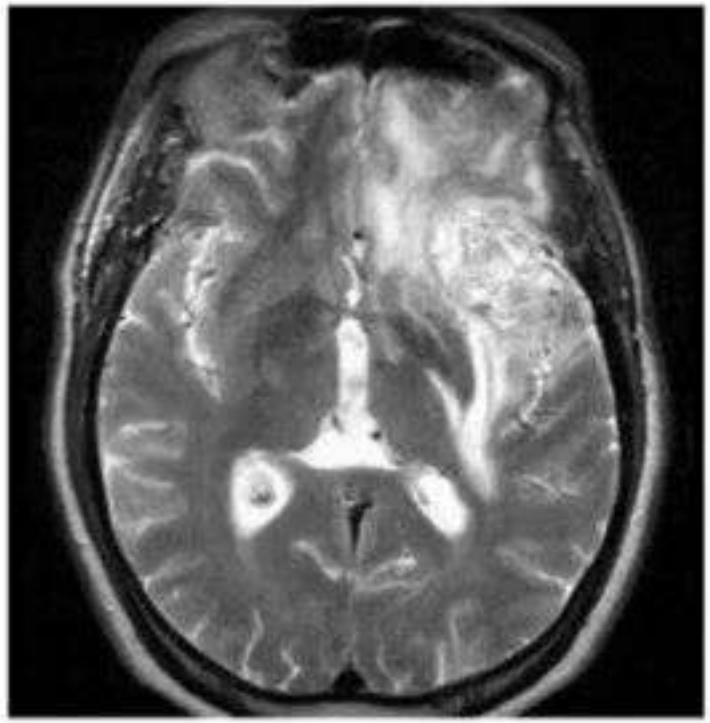
Grade & Median Survival in Astrocytomas

Grade	Median Survival
Grade- 1: Pilocytic astrocytoma	8-10 years
Grade- 2: Diffuse astrocytoma	7-8 years
Grade- 3: Anaplastic astrocytoma	2-3 years
Grade- 4: Glioblastoma	< 1 year

Glioblastoma

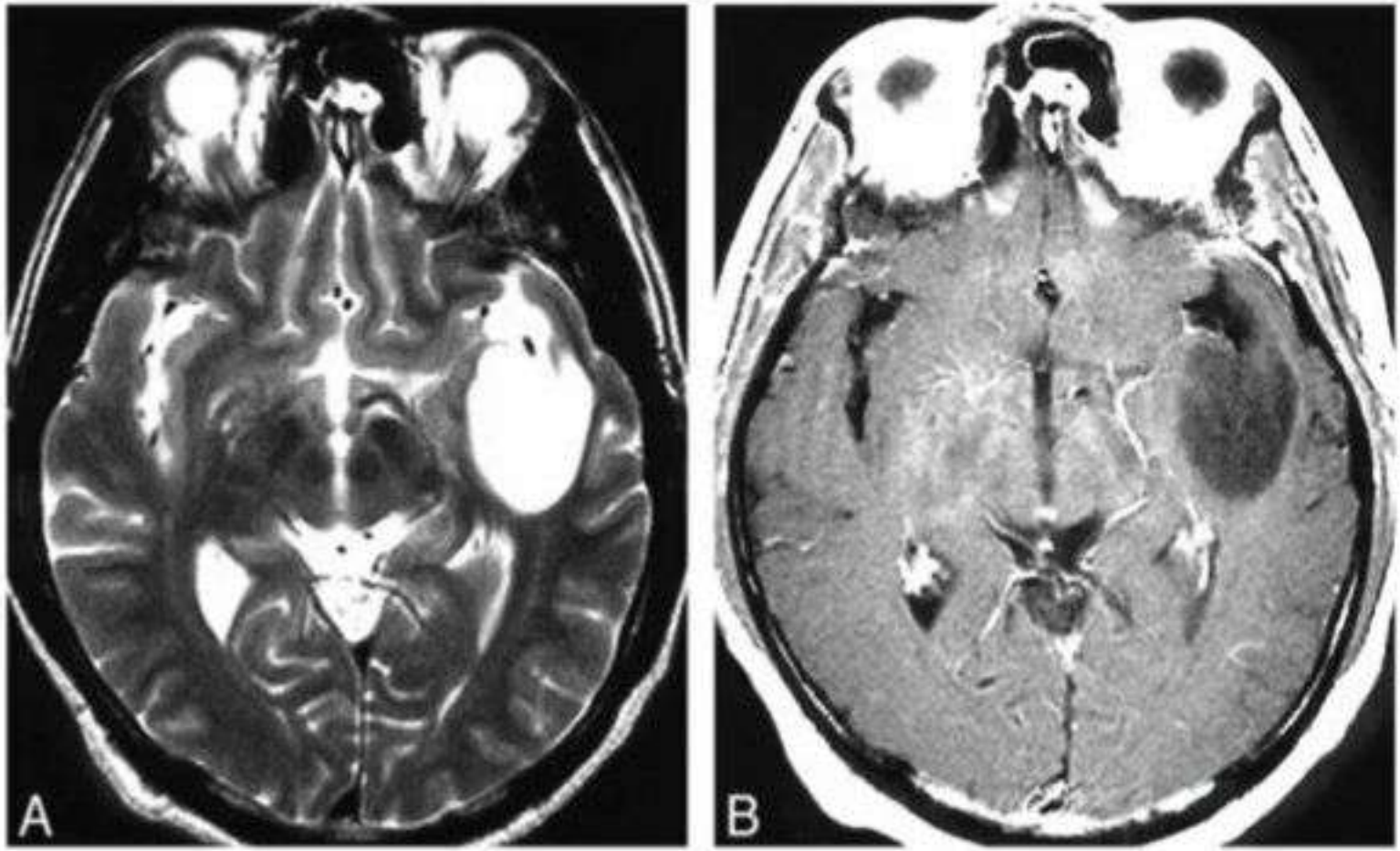


MRI T1 weighted



MRI T2 weighted

MRI: Low Grade Gliomas



MRI: High Grade Glioma
Anaplasic Astrocytoma
"Grade III"



MRI: Grade IV Glioma
High Grade Glioma "Glioblastoma"

