

Aqueductal tumor

Pure [aqueductal](#) tumors (ATs) differ from [pineal region](#) and [tectal/tegmental tumors](#) in that they are epicentered within the aqueduct. Nevertheless, these tumors are rarely described as a separate type of tumor, and are often grouped with other lesions located in the same vicinity.

Between 1999 and 2013, 16 patients with AT were diagnosed and treated at the three tertiary centers. Ages at presentation ranged from 5.5 to 57 years. Thirteen patients presented with hydrocephalus-related symptoms, and two were identified incidentally. Thirteen patients underwent an [endoscopic third ventriculostomy](#), and two of these underwent a simultaneous endoscopic biopsy (one grade II ependymoma, one non-specified low-grade glioma). Two others underwent shunt placement. Three patients underwent resection due to tumor progression. Pathologies included glioblastoma multiforme, glioneural tumor, and ependymoma grade II. All non-resected tumors remained stable or grew only minimally.

ATs are a rare entities that usually present with obstructive hydrocephalus. Treatment includes primarily cerebrospinal fluid drainage (preferably via an [endoscopic third ventriculostomy](#)). Simultaneous endoscopic biopsy may be done in selected cases. Tumor resection should be reserved for growing tumors; the trans-fourth ventricular or trans-choroidal approaches are probably safer than other approaches used to reach the tectal region ¹⁾.

¹⁾

Roth J, Chaichana KL, Jallo G, Mirone G, Cinalli G, Constantini S. True aqueductal tumors: a unique entity. Acta Neurochir (Wien). 2015 Feb;157(2):169-77. doi: 10.1007/s00701-014-2264-9. Epub 2014 Nov 8. PubMed PMID: 25377385.

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