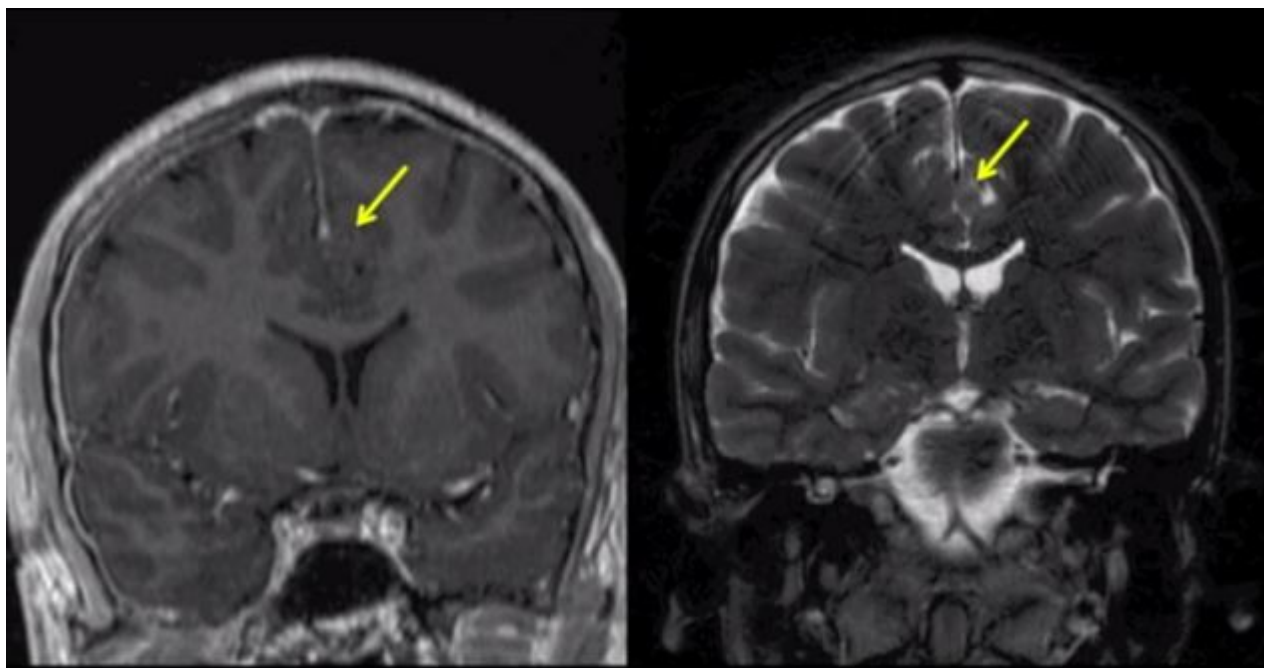
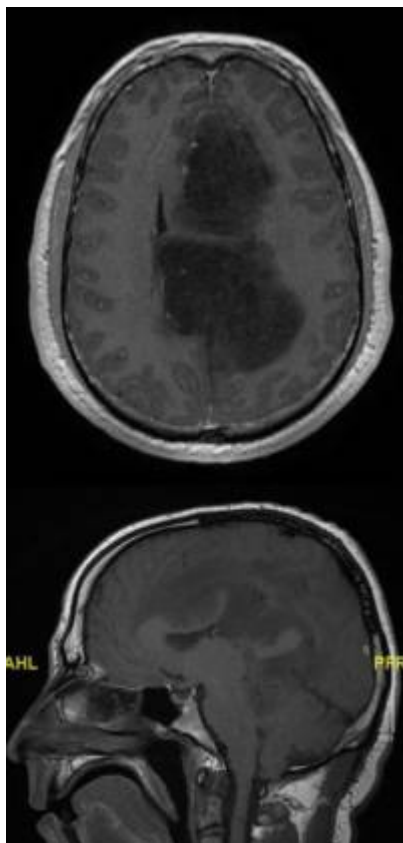
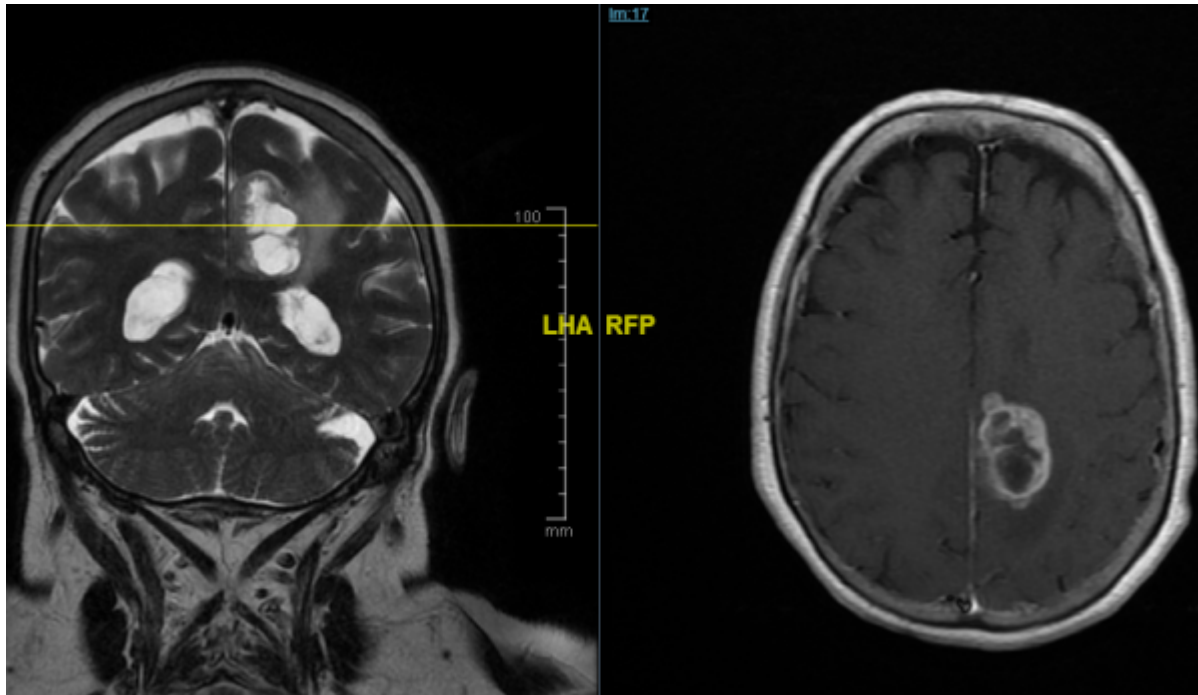


Cingulate gyrus glioma diagnosis

- Tumor resection in paramedian structures of the frontal lobe poses a risk for corpus callosum infarction
- Structural Network Hubs as Potential Organs at Risk in Glioma Patients After Radiation Therapy
- Presentation, surgical outcome, and supplementary motor area syndrome risk of posterior superior frontal gyrus tumors
- Laser interstitial thermal therapy (LITT) for pediatric low-grade glioma-case presentations and lessons learned
- Multivariate mapping of low-resilient neurocognitive systems within and around low-grade gliomas
- Physiotherapy Intervention in a Patient With a Glioma of the Cingulate Gyrus: A Report of a Rare Case
- The safety and accuracy of intratumoral catheter placement to infuse viral immunotherapies in children with malignant brain tumors: a multi-institutional study
- Cortical myelin and thickness mapping provide insights into whole-brain tumor burden in diffuse midline glioma





Infiltrative neoplastic lesion centered on the left cingulate gyrus of at least 13 cm x 6 cm x 9.2 cm (ap x tra x cc) that distorts and infiltrates the body and part of the splenium of the corpus callosum, crossing the midline and producing a subfalcian herniation to the right with a deviation of about 9 mm from the midline and compression of the left ventricular atrium.

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