

Convexity meningioma surgery indications

With the [conservative recommendations](#) for [surgery](#) for [asymptomatic meningiomas](#) and the advent of [radiosurgery](#) during the past 10 years, microsurgically treated [convexity meningiomas](#) are now typically large in size ¹⁾. Nevertheless, the patient's clinical course following microsurgical removal of these lesions is expected to be uncomplicated. ^{2) 3)}.

If the [convexity meningioma](#) is symptomatic or growing and the patient is of an age in which surgery is appropriate.

If the meningioma is large and has a rich vascular supply, its amenable for a pre-surgery [embolization](#).

The resection of the meningiomas surrounding the dura is an important goal during the removal of a convexity meningioma.

Simpson Grade I resection should continue to be the goal for [convexity meningiomas](#) ⁴⁾.

¹⁾ ³⁾

Sanai N, Sughrue ME, Shangari G, Chung K, Berger MS, McDermott MW. Risk profile associated with convexity meningioma resection in the modern neurosurgical era. J Neurosurg. 2010 May;112(5):913-9. doi: 10.3171/2009.6.JNS081490. PMID: 19645533.

²⁾

Morokoff AP, Zauberman J, Black PM. Surgery for convexity meningiomas. Neurosurgery. 2008 Sep;63(3):427-33; discussion 433-4. doi: 10.1227/01.NEU.0000310692.80289.28. PMID: 18812953.

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Hasseleid BF, Meling TR, Rønning P, Scheie D, Helseth E. Surgery for convexity meningioma: Simpson Grade I resection as the goal: clinical article. J Neurosurg. 2012 Dec;117(6):999-1006. doi: 10.3171/2012.9.JNS12294. Epub 2012 Oct 12. PubMed PMID: 23061394.

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