

Convexity meningioma treatment

Because of their location on the brain's surface (as opposed to deep within the brain), [convexity meningiomas](#) are typically easier to treat than other types of [meningiomas](#).

If the meningioma is small and produces no symptoms, a "watchful waiting" approach, which involves regular MRI scans to monitor its growth is recommended.

Stereotactic radiosurgery: For those patients in whom surgery is not advisable or the meningioma is unresectable, radiation therapy can be used to treat small incompletely removed tumors and certain tumor recurrences.

Preoperative embolization of intracranial meningioma

[Preoperative embolization of intracranial meningioma](#)

[Tumor embolization](#) may be best reserved for large hypervascular [convexity meningiomas](#). Usually performed 24 hours to 1 week preoperatively. The [devascularization](#) causes attenuation in intraoperative blood loss and the resultant [necrosis](#) frequently renders the tumor softer and easier to remove. However, tumor [swelling](#) may occur and occasionally an emergency [craniotomy](#) may be required

Surgery

see [Convexity meningioma surgery](#)

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