

Dexamethasone for brain tumor treatment

for patients not previously on steroids:

- adult: 10 mg IVP loading, then 6 mg PO/IVP q 6 hrs ^{1) 2)} In cases with severe **vasogenic edema**, doses up to 10 mg q 4 hrs may be used
- peds: 0.5–1 mg/kg IVP loading, then 0.25–0.5 mg/kg/d PO/IVP divided q 6 hrs. NB: avoid prolonged treatment because of growth suppressant effect in children
- for patients already on steroids:
 - for acute deterioration, a dose of approximately double the usual dose should be tried

Vasogenic edema: **blood-brain barrier** disrupted. **Protein** (serum) leaks out of the vascular system and therefore may enhance imaging. Extracellular space (ECS) expands. Cells are stable. Responds to **corticosteroids** (e.g. dexamethasone). Seen e.g. surrounding **brain metastases**.

see [Dexamethasone for brain metastases](#)

¹⁾

Galich JH, French LA. Use of Dexamethasone in the Treatment of Cerebral Edema Resulting from Brain Tumors and Brain Surgery. Am Pract Dig Treat. 1961; 12:169–174

²⁾

French LA, Galich JH. The Use of Steroids for Control of Cerebral Edema. Clin Neurosurg. 1964; 10:212–223

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