

Intracranial growing teratoma syndrome

A case whose intractable [hydrocephalus](#) improved after penetrating the [aqueductal membrane](#) via [endoscopy](#) is described. An 11-year-old boy was treated for pineal [intracranial growing teratoma syndrome](#) (IGTS). The tumor grew rapidly in a short period, and hydrocephalus progressed despite an [endoscopic third ventriculostomy](#) (ETV). Although the obstruction was removed by radiation, chemotherapy, and total tumor resection, the hydrocephalus did not improve. Endoscopic membrane perforation was performed because a membrane-like structure was seen at the entrance of the [cerebral aqueduct](#) on magnetic resonance imaging. The hydrocephalus improved immediately after the operation, and the patient's consciousness disturbance also improved significantly.

The purpose of this report is to update the current knowledge and standards of management for patients with [growing teratoma syndrome](#), as well as to drive future translational and clinical studies by recognizing the unmet needs concerning [hydrocephalus](#) ¹⁾.

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References

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Kajiwar S, Nakamura H, Sakata K, Komaki S, Negoto T, Morioka M. Endoscopic aqueductal membrane fenestration was effective for intractable hydrocephalus after removal of a nongerminomatous germ cell tumor exhibiting growing teratoma syndrome: a case report. BMC Pediatr. 2022 Nov 28;22(1):683. doi: 10.1186/s12887-022-03743-y. PMID: 36443673.

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