

Intraventricular glioblastoma

Although [glioblastoma](#) is the most common [primary brain tumor](#), primary intraventricular locations are extremely rare; only 21 cases have been reported to date.

A retrospectively acquired database of all intracranial glioblastomas treated in two different neurosurgical departments during the last ten years was queried. Patients with histologically proven intraventricular glioblastomas were included in the study.

Eight patients were identified as having a histologically confirmed intraventricular glioblastoma. Patient age at diagnosis ranged from 6 to 74 years (mean 29.6 years) and the Male/Female ratio was 5:3. Raised intracranial pressure due to hydrocephalus was the main cause of the clinical manifestations. The tumor was located within the lateral ventricle in six cases and the anterior third ventricle in two others. Gross total tumor excision was achieved in three patients, whereas the surgical resection was subtotal in four cases and a surgical biopsy was performed in one patient. Post-operative adjuvant therapies were administered in five patients. Median survival time was 32.1 months, and three patients were alive at the end of study. All of them had Isocitrate dehydrogenase mutated tumors.

Intraventricular Glioblastoma is extremely rare and can affect younger individuals including children. This malignant tumor should be included in the differential diagnosis of [intraventricular lesions](#) especially in the [lateral ventricles](#). Radical surgical resection can be associated with remarkable disease free [survivals](#), especially in [IDH](#) mutated tumors. As recurrence is virtually unavoidable, long term follow-up is mandatory ¹⁾.

Case reports

2015

Sarikafa et al. present an additional case of intraventricular GBM with detailed clinical course, radiological and pathological findings ²⁾.

2014

'Goose-bumps' seizures are rare manifestations of epilepsy. They are rarely reported by patients and can be easily dismissed by clinicians. Clinically, it carries some diagnostic localising value especially with unilateral onset. In this report, Asha et al. present a case of intraventricular glioblastoma multiforme with ipsilateral goose bumps and review the literature ³⁾

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Ben Nsir A, Gdoura Y, Thai QA, Zhani Kassir A, Hattab N, Jemel H. Intraventricular Glioblastomas. World Neurosurg. 2016 Jan 7. pii: S1878-8750(15)01786-6. doi: 10.1016/j.wneu.2015.12.079. [Epub ahead of print] PubMed PMID: 26773981.

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Sarikafa Y, Akçakaya MO, Sarikafa S, Ozkaya F, Akdemir O, Celik SE. Intraventricular glioblastoma multiforme: Case report. Neurocirugia (Astur). 2015 May-Jun;26(3):147-50. doi: 10.1016/j.neucir.2014.09.001. Epub 2015 Feb 10. PubMed PMID: 25677169.

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Asha MJ, Tansey RJ, Gan YC. 'Goose bumps' as presenting feature of intraventricular glioblastoma multiforme. Br J Neurosurg. 2014 Apr;28(2):276-7. doi: 10.3109/02688697.2013.817530. Epub 2013 Jul 25. PubMed PMID: 23883371.

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