

Peritumoral edema in vestibular schwannoma

A retrospective study evaluated on [FLAIR](#) images. Preoperative patient data and intraoperative tumor features (presence of tumor pseudocapsule, vascularity, degree of adhesion/invasion of the [arachnoid](#)) were noted. Outcome measures were completeness of removal, neurological outcome, and complication rate. These parameters in patients with [peritumoral edema](#) (PTE) (group A) were correlated to those in matched series without [edema](#) (group B).

Thirty patients presented with PTE (5%). The mean [vestibular schwannoma](#) (VS) size was 3.4 cm. No major differences in the degree of adhesion or presence of an arachnoid plane were found. VS with PTE were more frequently hypervascular (26.7% in group A vs 6.7% in group B). The presence of PTE in VS was not related to surgical radicality. VS with PTE had worse early postoperative facial nerve function, but at 12 months, there was no major difference. VS with PTE were prone to cause postoperative [hemorrhages](#) in the tumor bed.

PTE in VS does not correlate with the degree of tumor adhesion and the presence of an arachnoid dissection plane. The radicality of tumor removal and long-term functional outcome in patients with and without PTE was similar. VS with PTE are more vascular and prone to cause postoperative hemorrhages. Therefore, meticulous hemostasis is advisable ¹⁾.

¹⁾

Samii M, Giordano M, Metwali H, Almarzooq O, Samii A, Gerganov VM. Prognostic Significance of Peritumoral Edema in Patients With Vestibular Schwannomas. *Neurosurgery*. 2015 Jul;77(1):81-6. doi: 10.1227/NEU.0000000000000748. PubMed PMID: 25856107.

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