

The clinical features of 18 cases of suprasellar germinoma were reviewed, and the following points stressed: 1) The incidence of intracranial germinoma and teratoma seems to be much higher in Japan than elsewhere. 2) Germinomas in the pineal region, the third ventricle, and the lateral ventricle were observed to be predominant in males. In suprasellar germinoma, however, males were not affected predominantly and the male:female ratio was 1:1. 3) Suprasellar germinomas caused three symptoms: diabetes insipidus, visual disturbances, and pituitary dysfunctions. 4) Pituitary functions were disturbed to various degrees. Some cases showed hypopituitarism but some showed an elevation of plasma concentrations of cortisol or luteinizing hormone and follicle stimulating hormone. 5) Some abnormalities showing a suprasellar mass were usually found on neuroradiological examination. 6) Suprasellar germinomas were very sensitive to radiotherapy and some of them rapidly disappeared on follow-up computerized tomography scanning after irradiation with as little as 1200 rads <sup>1)</sup>.

<sup>1)</sup>  
Takeuchi J, Handa H, Nagata I. Suprasellar germinoma. J Neurosurg. 1978 Jul;49(1):41-8. doi: 10.3171/jns.1978.49.1.0041. PMID: 660267.

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