

# Tuberculum sellae meningioma epidemiology

Tuberculum sellae meningioma (TS) and [diaphragma sellae meningiomas](#) represent 5–10% of all intracranial meningiomas.<sup>1)</sup>

True TS meningiomas are more common than DS meningiomas<sup>2) 3) 4)</sup>

The coexistence of a [pituitary macroadenoma](#) and a tuberculum sellae meningioma is very rare<sup>5)</sup>.

<sup>1)</sup>

Chi JH, McDermott MW. Tuberculum sellae meningiomas. Neurosurg Focus. 2003;14:e6.

<sup>2)</sup>

Al-Mefty O, Holoubi A, Rifai A, Fox J L. Microsurgical removal of suprasellar meningiomas. Neurosurgery. 1985;16(3):364–372.

<sup>3)</sup>

Rubin G, Ben David U, Gornish M, Rappaport Z H. Meningiomas of the anterior cranial fossa floor. Review of 67 cases. Acta Neurochir (Wien) 1994;129(1-2):26–30.

<sup>4)</sup>

Kinjo T, al-Mefty O, Ceric I. Diaphragma sellae meningiomas. Neurosurgery. 1995;36(6):1082–1092.

<sup>5)</sup>

Mahvash M, Igressa A, Pechlivanis I, Weber F, Charalampaki P. Endoscopic endonasal transsphenoidal approach for resection of a coexistent pituitary macroadenoma and a tuberculum sellae meningioma. Asian J Neurosurg. 2014 Oct-Dec;9(4):236. doi: 10.4103/1793-5482.146629. PubMed PMID: 25685225; PubMed Central PMCID: PMC4323972.

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