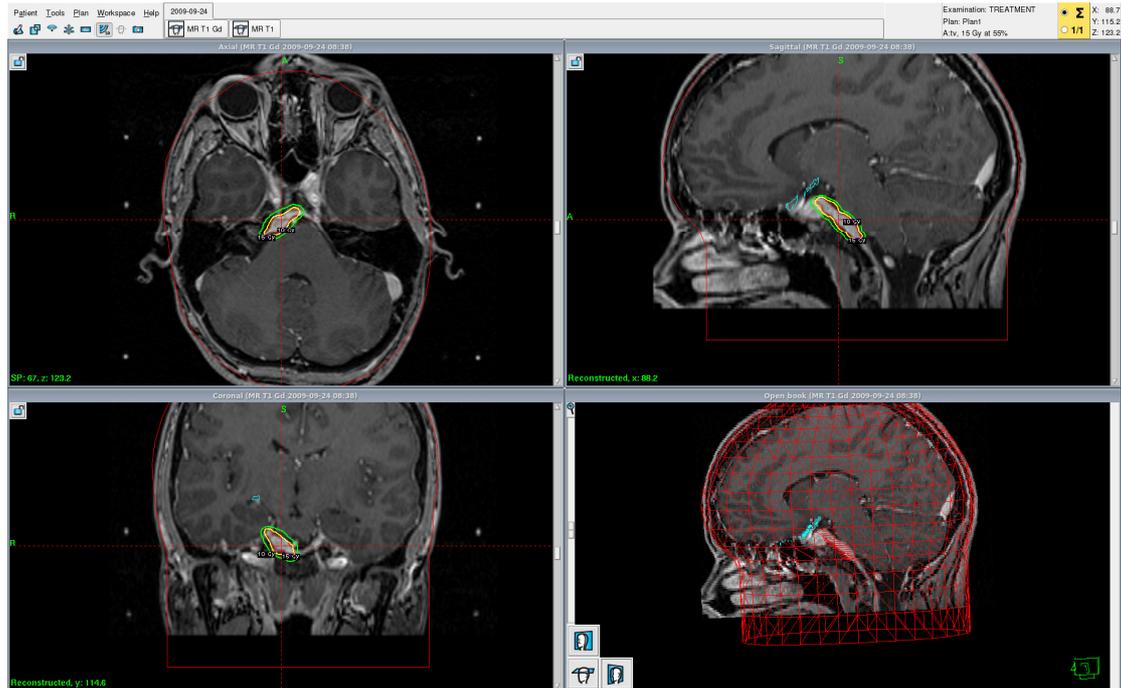


Case Study



Patient	41 year old male
Diagnosis	Right sphenoid meningioma
Treatment	16 shots, 15.0Gy to 55%

Patient History

Male patient presented with a history of dizziness. Due to the time of year and flu-like symptoms it was initially diagnosed as a viral reaction and treated accordingly. The gentleman returned with increasing dizziness and diplopia where an MRI scan confirmed the presence of a small meningioma of the right sphenoid. The tumour was deemed to be in an inoperable region of the brain and alternatives were discussed. While it was felt the meningioma was small enough to keep under observation, the young age of the patient and the higher risks associated with eventual tumour growth, the Multi Disciplinary Team (MDT) recommended that some form of action be taken sooner rather than later, with Stereotactic Radiosurgery proposed.

Treatment

The patient's case was discussed in detail by the MDT and it was felt that in light of the patient's young age and onset of symptoms that a proactive approach should be adopted. The precarious position of the tumour prohibited surgical removal, with concerns over the small surgical volume and possible neurological ill-effects upon approach also identified.

The patient had already undertaken his own research into Stereotactic Radiosurgery and was particularly well versed with regards to the treatment process and potential side-effects. Nonetheless these were further discussed by the consultants before the patient happily consented to treatment.

On the treatment day the patient underwent another MRI scan to identify the specific target area. This was highlighted by a Radiologist, and a treatment plan was created between the Medical Physicist and the Neurologist. The treatment plan was approximately 100 minutes in duration, and delivered 15Gy @ 55% through 16 individually placed shots.

Conclusion

The patient tolerated the treatment extremely well, staying with us for observation overnight before returning home the following morning. The patient reported no further or increase in current experienced side-effects.

Since treatment the patient has undergone yearly MRI scans to compare the tumour to the initial treated target. To date, the scans demonstrate that the tumour volume is identical to that as outlined at the initial planning stage, with previous side-effects well managed and the patient is delighted with the outcome.