

Neurosurgery Department



Brain Tumours

Meningiomas



National
Neuroscience Institute

SingHealth

Understanding Meningiomas

Meningioma is the most common type of brain tumour in Singapore, and occurs mostly in those aged 40 to 60.

Meningiomas grow on the protective tissue covering the brain and spinal cord, called the meninges.

Most meningiomas are slow-growing and non-cancerous (benign), which means that they do not spread to other parts of the body. However, a large meningioma can put pressure on the brain or spinal cord, irritate nerves and injure blood vessels in the brain, causing damage or disability.

Like other types of brain tumours, the cause of meningiomas is unknown.

Signs of Meningiomas

Most benign tumours do not show any signs until they are large and increase brain pressure. Signs vary, depending on the tumour's location.

They include:

- Persistent headaches
- Seizures
- Numbness/weakness in the arms/legs if the tumour is near the area which controls motor functions
- Double/blurred vision if the tumour presses the nerve leading to the eye, or is large enough to cause a generalised increase in pressure
- Loss of smell, taste, hearing and memory, if the tumour grows between the eyebrow and nose

Diagnosing Meningiomas

A Computed Tomography (CT) and Magnetic Resonance Imaging (MRI) scan help to determine the size, location and likelihood of the tumour growing.

Treating Meningiomas

Small and slow-growing benign tumours without major signs may not need immediate treatment.

Periodic brain scans should be done to monitor tumour growth. If the tumour does not grow in size, surgery may not be needed.

If there are new symptoms or signs, consult your attending doctor.

Surgery

The majority of meningiomas can be treated with surgery.

The tumour can be removed if it is near the brain's surface and do not affect critical functions like sight.

Some tumours, however can only be partially removed because they are near important brain structures. A partial removal will help to relieve symptoms.

Medications to reduce brain swelling and prevent seizures may be given before and after surgery, if needed.

Physio, occupational and speech therapy may help with temporary muscle weakness, coordination and speech problems.

The recovery time depends on age, the overall health of the patient, location and size of the tumour.

Radiation Therapy and Radiosurgery

If the tumour is cancerous (malignant) or can only be partially removed, radiation therapy may be needed.

A high and precise dose of radiation is aimed at the tumour, with no or low damage to surrounding brain structures. This helps to shrink the tumour or prevent it from growing.

As tumours may recur, go for regular checks.

Support for Brain Tumours

Brain Tumour Society (Singapore) (BTSS)

BTSS is a community of brain tumour patients, caregivers and survivors. The BTSS provides community support and resources such as befrienders, financial assistance and public education. Started by brain cancer survivors, BTSS meets once a month so that members can share experiences and advice on how to cope with the disease.

For more information, visit

www.braintumoursociety.org.sg.

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