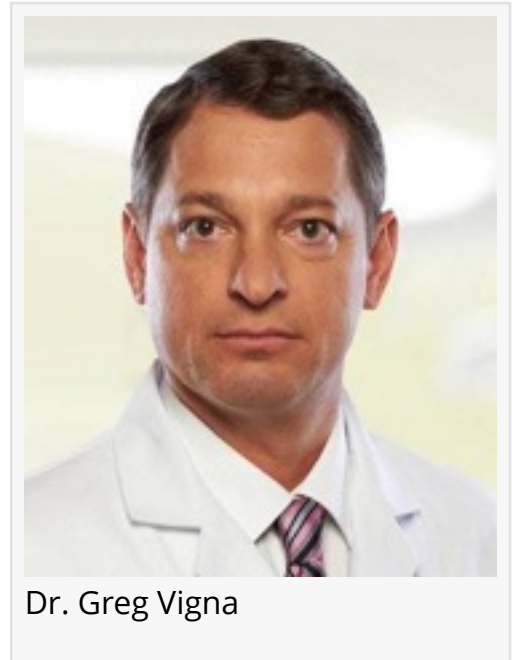


# Meningioma Subtotal Resection/Reoccurrence: Radiation versus Observation versus Re-resection

*Study shows single-fraction SRS for benign meningioma has a stroke risk similar to observation, lower than fractionated proton-photon RT*

SANTA BARBARA, CA, UNITED STATES, December 4, 2024 /EINPresswire.com/ -- "These findings indicate that for patients with benign meningioma desiring to avoid the high stroke risk of fractionated proton-photon RT (radiotherapy), SRS (single-fraction stereotactic radiosurgery (SRS) has a comparable stroke risk profile to observation," states Dr. Jeremy N. Ciporen, Department of Neurological Surgery, Oregon Health and Science University.



Dr. Greg Vigna

Greg Vigna, MD, JD, national pharmaceutical injury attorney, states, "Radiation therapy causes irreversible injury to tumors, which is the intended target, but also causes irreversible injury to the brain and blood vessels. Stroke and quickly progressive cognitive impairment are not uncommon following radiation therapy. Clearly, Dr. Ciporen's article supports that complete resection is generally the goal when surgical treatment of [meningiomas](#) is contemplated. In cases where the location of the tumor poses technical difficulties for

complete removal, these patients should be referred to surgeons with the skills to provide complete removal with or without single-fraction stereotactic radiosurgery."

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*Greg Vigna, MD, JD*

What did Dr. Ciporen report in "Long-term stroke risk of single-fraction photo-based stereotactic radiosurgery for meningioma" published in *Clinical Neurology and Neurosurgery* 173 (2018) 169-172?:

"The long-term stroke rate following single-fraction

photon-based SRS (single-fraction stereotactic radiosurgery) for benign meningioma was 1.7%, more than twelve times lower than for fractionated proton-photon RT (radiotherapy) and

comparable to that expected for the general population.

The majority of patients underwent resection before SRS. These findings indicate that for patients with benign meningioma desiring to avoid the high stroke risk of fractionated proton-photon RT (radiation therapy), SRS has a comparable stroke risk profile to observation."

Read Dr. Ciporen's article:

<https://www.sciencedirect.com/science/article/abs/pii/S0303846718302841>

Dr. Vigna concludes, "As a PM&R physician, now retired, I have managed dozens of patients with complications caused by meningiomas, including radiation-induced strokes and cognitive decline. My law firm's criteria for representation are women who required craniotomies for meningiomas following the use of Depo-Provera for 1 year or more."

[Vigna Law Group](#) is a national litigation firm that focuses on neurological injuries caused by medical malpractice, mid-urethral slings, and bad drugs including Depo-provera. Other practice areas include hospital-acquired decubitus ulcers and birth injuries. His California and Washington DC law firms represent women with the Ben Martin Law Group, a national pharmaceutical injury law firm in Dallas, Texas against Coloplast and Boston Scientific for neurological pain syndromes caused by polypropylene transobturator slings.

Read Dr. Vigna's free book, 'Mother's Guide to Birth Injury'.

Click here for a FREE BOOK on Vaginal Mesh Pain by Dr. Vigna:

<https://vignallawgroup.com/publications/>

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