Sydney South Western Area Health Service-Western Zone BRAIN TUMOUR EDUCATION & SUPPORT GROUP



FACT SHEET

Treatment for Brain Tumours? - SURGERY

Surgery is the primary treatment for accessible brain tumours (tumours that can be approached without causing severe damage), and some tumours can be removed completely by surgery. If a tumour is more spread out, or if it can not be removed without damaging other important parts of the brain, the surgeon may be able to remove part of the tumour. This will improve symptoms by reducing pressure on the rest of the brain. Sometimes tumours can not be operated on because it would be too dangerous.

Many benign tumours are treated by surgery only. Most malignant tumours require additional treatment.

Why Would Surgery Not Be Used?

Your doctors consider several factors before deciding whether or not to recommend surgery.

- The location of the tumour tumours deep in the brain, surrounded by critical structures, or in areas that control language or movement, might be inaccessible.
- The size of the tumour.
- The number of tumours.
- The tumour's characteristics: does it have a distinct border or is it spreading?
- General health are your heart, lungs, kidneys and liver functioning well?
- If second surgery is being considered, how long has it been since the first operation?

The operation to treat a brain tumour is called a craniotomy. "Crani" means skull, "otomy" means cutting into. Some hair is shaved off, the surgeon cuts and moves aside the skin, then removes a piece of skull above the tumour. The tumour is removed, the piece of skull replaced, and the skin stitched back in place.

Biopsy

In some cases the surgeon will only do a biopsy. Sometimes this is done with computer guidance, through a small hole made in the skull. A tiny piece of tumour is removed and looked at under the microscope, to see what type of tumour it is. This helps the doctors decide on further treatment.

Shunts

If a fluid build up in the brain (hydrocephalus) occurs, a shunt procedure to drain excess or blocked fluid might be required. The surgeon may put in a small permanent tube, called a shunt, just beneath the skin. The shunt will take the extra fluid from the brain and drain it into the abdomen.