

Display Settings: Abstract

[J Neurosurg.](#) 2011 Jul 22. [Epub ahead of print]

Family and personal medical history and risk of meningioma.

Claus EB, Calvocoressi L, Bondy ML, Schildkraut JM, Wiemels JL, Wrensch M.

Department of Epidemiology and Public Health, Yale University School of Medicine, New Haven, Connecticut;

Abstract

Object Little is known about the epidemiology of meningioma, the most frequently reported primary brain tumor in the US. The authors undertook a case-control study to examine the relationship between family and personal medical history and meningioma risk. Methods The authors compared the personal and first-degree family histories of 1124 patients with meningioma (age range 20-79 years) in Connecticut, Massachusetts, North Carolina, the San Francisco Bay Area, and 8 Houston counties between May 1, 2006, and February 26, 2010, and the histories of 1000 control individuals who were frequency-matched for age, sex, and geography. Results The patients were more likely than the controls to report a first-degree family history of meningioma (OR 4.4, 95% CI 1.6-11.5), and there was an even stronger association in younger cases. The patients were less likely than controls to report immune conditions including allergy (OR 0.6, 95% CI 0.5-0.7) but were more likely to report a history of thyroid cancer (OR 4.7, 95% CI 1.02-21.5) or leukemia (OR 5.4, 95% CI 1.2-24.1) (most after radiotherapy). Among women, patients were more likely than controls to report hormonally related conditions-uterine fibroid tumors (OR 1.2, 95% CI 1.0-1.5), endometriosis (OR 1.5, 95% CI 1.5-2.1), and breast cancer (OR 1.4, 95% CI 0.8-2.3). Conclusions The influence of genetics, the immune system, and radiation near the head on meningioma risk is suggested in the authors' findings; the role of hormones is intriguing but requires further study.

PMID: 21780859 [PubMed - as supplied by publisher]

[LinkOut - more resources](#)