Recurrence of Skull Base Meningiomas: The Role of Aggressive Removal in Surgical Treatment.
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Abstract
Objectives  The recurrence of meningiomas is a crucial aspect that must be considered during the planning of treatment strategy. The Simpson grade classification is the most relevant surgical aspect to predict the recurrence of meningiomas. We report on a series of patients with recurrent skull base meningiomas who were treated with the goal of radical removal. Design A retrospective study. Setting Hospital Ernesto Dornelles, Porto Alegre, Brazil. Participants Patients with recurrent skull base meningiomas. Main Outcomes Measures The goal of obtaining aggressive resection (i.e., Simpson grades I and II). Results The average age was 54 years, the mean follow-up period was 52.1 months, and Simpson grades I and II were obtained in 82%. The overall mortality was 5.8%. Transient cranial nerve deficits occurred in 11.7%; the definitive morbidity was also 5.8%. A second recurrence occurred in 5.8%. Conclusions Radical removal of recurrent skull base meningiomas is achievable and should be considered an option with a good outcome and an acceptable morbidity. The common surgical finding that was responsible for recurrence in this study was incomplete removal during the first surgery. We recommend extensive dura and bone removal in the surgical treatment of such recurrent lesions.

KEYWORDS: Simpson grade; brain tumor; meningioma; recurrence; skull base