



## **Brain Tumors**

**Diagnostics** 

**BIO 389** 

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## **Brain tumors - Diagnostics**

- Clinical diagnosis
  - Taking history (timing of symptoms onset and progression, severity of symptoms, presence of other diseases, family history etc.)
  - Physical examination
- Technical diagnostics
  - Imaging
  - Nuclear medicine
  - Lab investigations (cerebro-spinal fluid (CSF))
  - Pathology / Molecular analyses
  - EEG (electroencephalography)





### **Brain tumors - Diagnostics**

- Imaging
  - Computed tomography (CT)
  - Magnetic resonance imaging (MRI)
    - Anatomical, functional (fMRI), metabolic (spectroscopy)
  - Conventional X-ray, angiography...
  - Intraoperative imaging (ultrasound / MRI)
- Nuclear medicine
  - Positron emission tomography (PET)
- Laboratory investigation
- Pathology
  - from CSF, biopsy, resection





#### Practical issues

- Use CT or better MRI scan to obtain anatomical pictures of the brain and to reveal structural alterations
- Use contrast agent to reveal break-down of the blood-brain-barrier
- Perfusion-MRI and spectroscopy might help to differentiate tumor from other differential diagnosis or to learn more about tumor type
- fMRI might help the surgeon to calculate and avoid risks
- PET gives insight in tumor metabolism or receptor status
- Angigography might help for differential diagnosis and might help the surgeon





#### CT scan







with contrast agent

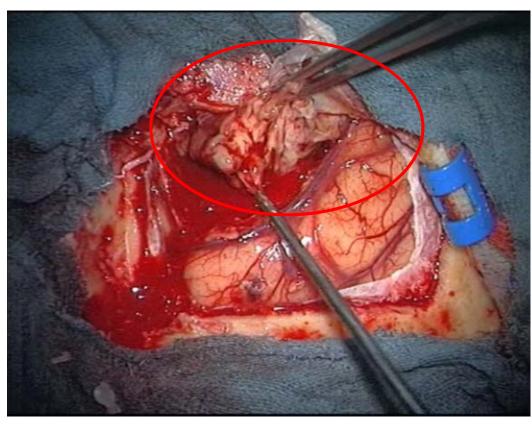
**⇒** helps to make the diagnosis



### Intraoperative ultrasound



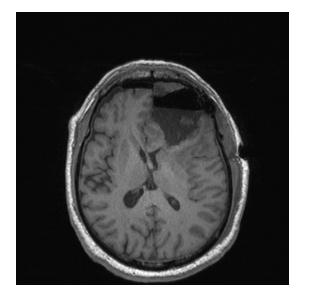
**⇒** helps during surgery



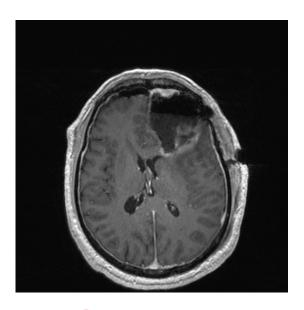




### MRI scan (post-operative) - Histology: glioblastoma







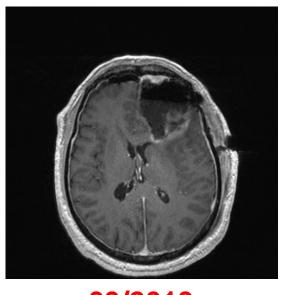
with contrast agent

⇒ helps to assess the tumor status after surgery / base line
MRI scan

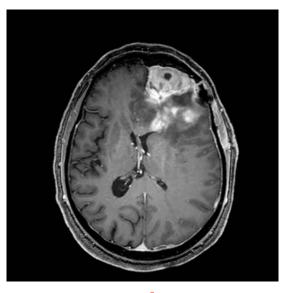




#### **MRI** scan



03/2013



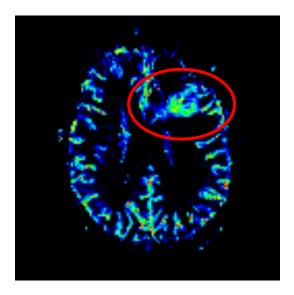
04/2013

**⇒** helps to discover tumor progression

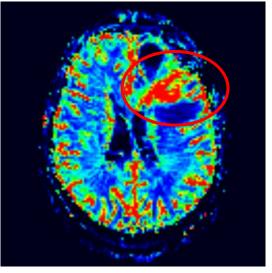




### **MRI** perfusion



**CBF**Cerebral blood flow



**CBV**Cerebral blood volume

**⇒** helps to discover tumor progression

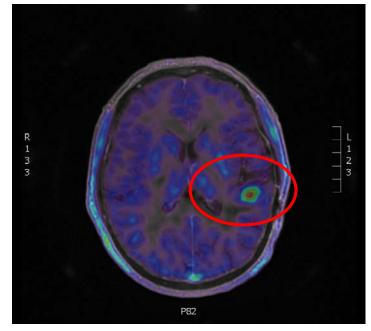




#### **MRI** scan



FET (fluorethyl-tyrosine) - PET



⇒ helps to discover tumor progression / active tumor

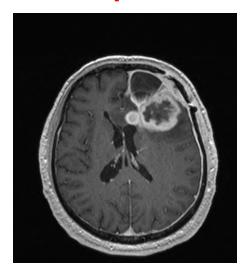
plus



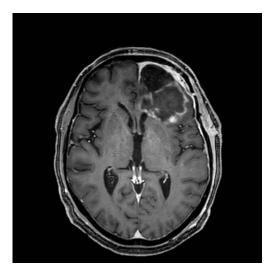


#### **MRI scan**

### **Tumor-specific treatment with bevacizumab**



**Start** 



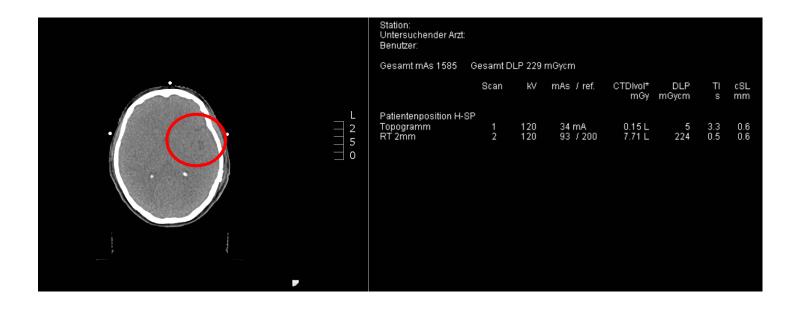
3 months later

⇒ helps to monitor treatment / to make treatment decisions





### **Planning CT scan**

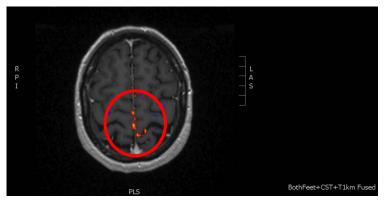


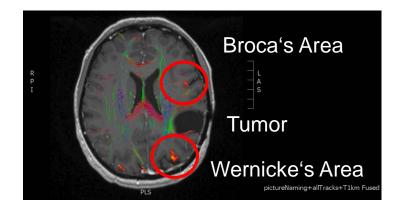
⇒ helps to plan external beam radiotherapy (Department of Radiooncology)

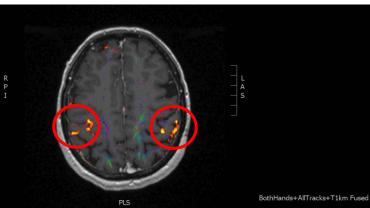




### **Functional (f) MRI**





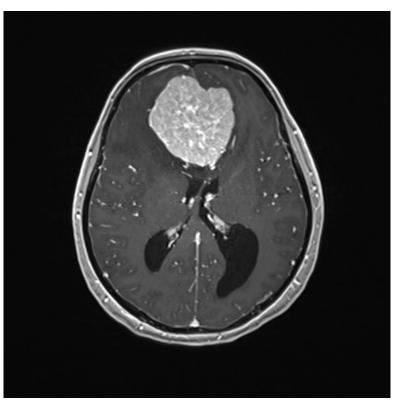


⇒ presurgical planning requires knowledge of eloquent areas of the cortex





### Meningeoma – MRI scan

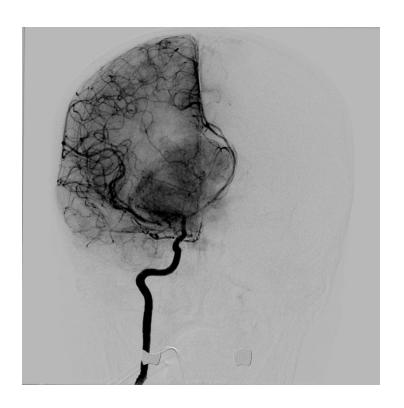






### **Meningeoma - Angiography**

Commonly supplied by dural arteries



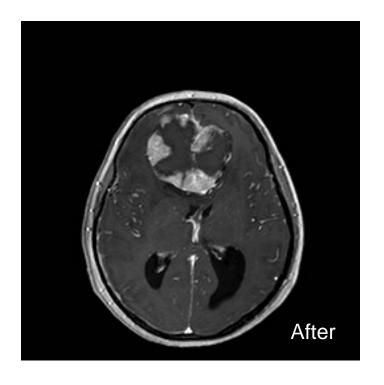






Meningeoma – The role of preoperative angiography and embolization



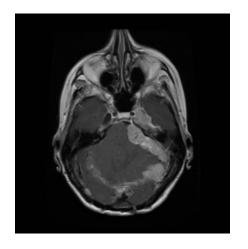


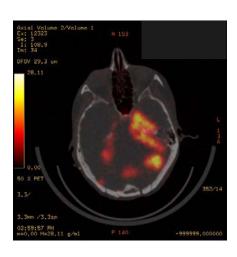
⇒ helps to diminish operative time and intraoperative blood loss



#### **Gallium<sup>68</sup> DOTATATE-PET**

- -DOTATATE binds to <u>somatostatin receptors</u>, which are found on the cell surfaces of a number of neuroendocrine tumors, and thus directs the radioactivity (Gallium68) into the tumors
- -Tested for diagnosis



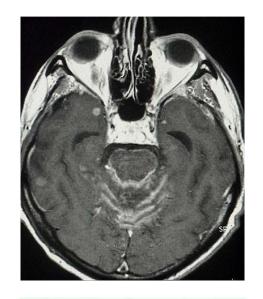


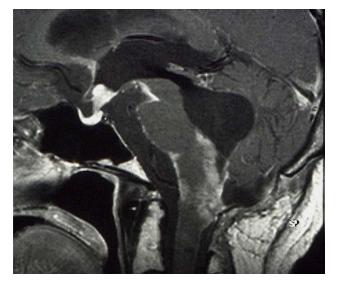
-<u>Lutetium<sup>117</sup> DOTATATE</u> has been tested for the treatment of somatostatin-positive tumors



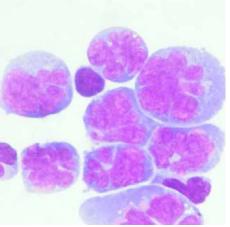
# Diagnostics – cerebrospinal fluid

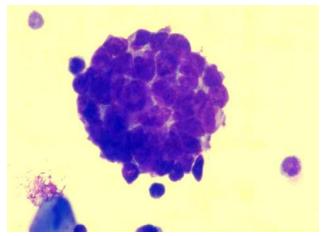
Solid type





Nonadherent type







# **Brain tumors - Diagnostics**

**EEG:** electrophysiological monitoring method to record electrical activity of the brain

- Epileptiform pattern
- Focal slowing

