Title: Stereotactic Radiosurgery (SRS) induced higher-grade transformation of a benign meningioma into atypical.

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Keywords: stereotactic radiosurgery, benign , meningioma

I. Abstract Body:

Background. *SRS is currently a widely applied procedure for meningioma management principally for skull base tumors. Whether used as a primary, adjuvant or salvage, SRS is a safe, less invasive and as an effective modality of treatment as microsurgery. The transformation for a meningioma following Radiosurgery raises a concern and our current understanding about it is highly limited. Few case reports exist describing meningioma dedifferentiation after SRS to a higher grade. Moreover, a relatively small number of cases reported in large retrospective studies with little elaboration.*

A case of transformation to a higher grade after SRS described. The risk of progression after SRS is low and the risk of transformation after SRS is trivial. The early timing for recurrence and field related radiation may favor a relationship between SRS and transformation(causality) although transformation as a part of the natural history of the disease cannot be entirely excluded. Tumor progression (treatment failure) after SRS may demonstrate grade progression and careful, close and prolonged follow up is highly recommended. Also, acknowledging that there is a low risk of early and delayed complications and a trivial risk of transformation, should not preclude its use as SRS affords a high level of safety and efficiency.

II. Biography:

Dr. AlRashed, A dedicated Neurosurgeon with a demonstrated history of working in the hospital & health care. Skilled in Clinical Research, Adult, Pediatrics, Hospitals, Medicine, and Healthcare. Strong healthcare services professional with a CCT and FRCS (Neuro.Surg) focused in Neurosurgery from 25 year in Academic and Clinical Experience in United Kingdom-London. First to be honoured to introduce ROWENA Neurosurgical models to train junior residents in Kingdom of Saudia Arabia

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