MENINGIOMAS. REPORT OF TWO CASES

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In Cushing's series of 2,203 verified intracranial tumors, the meningiomas comprised 13.4 per cent. The incidence has been reported as somewhat higher by others (Olivecrona, 15.8 per cent; Craig, 14.9 per cent; Horrax, 19 per cent). Despite its frequent occurrence among brain tumors, the meningioma is rarely seen as a multiple growth unless one includes those cases of centralized neurofibromatosis, a manifestation of von Recklinghausen's disease, in which the dura is often studded with innumerable small meningiomas. Cushing and Eisenhardt have preferred to designate this condition, which is usually associated with bilateral acoustic tumors, as meningiomatosis rather than to include it in the group of multiple meningiomas. Using this strict classification, they were able to isolate only three examples of true multiple meningiomas from their series of 295 cases of intracranial meningiomas.

The first case of multiple meningiomas reported was that of Anfimow and Blumenau in 1889, who found at necropsy four large and several smaller dural endotheliomas. Similar cases have been reported by others (Krivy, Flick, Üprus). Hosoi, who reviewed the subject in 1930, was able to collect 22 cases of multiple meningiomas in the literature. Eleven of these (50 per cent) were associated with other intracranial tumors, chiefly acoustic neuromas, and consisted of a diffusion of tumor nodules over the dura. Cushing would classify these cases as “meningiomatosis.” Hosoi’s case, although not associated with acoustic neuromas, was accompanied by multiple angiomas in the cortex of the right frontal lobe. Frazier and Alpers in their report of 75 verified meningiomas included one example of multiple tumors (Case xiv). Of 60 cases of meningioma reported by Horrax, the growths were multiple in four (no mention is made of associated stigmata of von Recklinghausen’s disease).

The successful removal of multiple meningiomas has been rarely reported. Heuer and Dandy in 1916 reported the first successful removal of two adjacent dural endotheliomas, one having recurred after a preceding operation. Similar cases have been reported by Raaf and Craig, Woltman and Love, Puusepp, Cushing and Eisenhardt, and Echols. In most instances, only two or three tumors were removed. Cushing’s patient underwent five operations over a period of 14 years. One meningioma was removed at each of the second, third and fourth operations. At the fifth operation, numerous small confluent meningiomatous tumors were removed in addition to a large parasagittal growth. In Echol’s case, 9 small ones and 1 large meningioma were successfully removed.

A review of the material at this clinic revealed that 58 patients with in-
tracranial meningiomas were operated upon during the past six years. Of these, four may be considered as multiple growths. Two of these fall into the group of diffuse dural meningiomatosis associated with central neurofibromatosis. One of these two, in addition to bilateral acoustic tumors, displayed at necropsy a generalized neurofibromatosis of the spinal nerve roots and cutaneous evidence of von Recklinghausen's disease. The remaining two cases, the basis of the present report, fall into the group of true multiple meningiomas as delineated by Cushing and Eisenhardt.

CASE REPORTS

Case 1 is of unusual interest not only because 10 meningiomas were removed in 4 successive operations but also because of the graphic histological transition from a benign psammomatous tumor disclosed at the original operation to an unquestionably malignant meningioma when removed at the fourth operation. In Case 2, two distinct meningiomas were successfully removed in one operation. One was a typical left frontal parasagittal tumor arising from the falx, the other a smaller growth in the left inferior frontal region which extended into the lips of the Sylvian fissure.

Case 1. E. L., a 56 year old salesman, was admitted to the Jewish Hospital on January 14, 1940. For 6 months his family had noticed a marked change in the patient's personality.

From an alert, aggressive type he had become a quiet, meek, apathetic individual who preferred to sit quietly by himself. Within a short time he found it difficult to concentrate and soon he became slovenly in his habits and careless about his dress. There had been no headache, vomiting or visual disturbances.