

## **RADIOSURGERY FOR ACOUSTIC NEUROMAS**

If you have been referred for possible Radiosurgery for your Acoustic Neuroma, there are actually 4 steps that are involved in the process.

**CONSULTATION:** This will involve an audiogram, a thorough examination and a discussion of your treatment options. Radiosurgery works best for small to medium tumors with some hearing function intact and little to no vertigo symptoms. It is also used to control residual tumors after surgery.

Should it be agreed upon by you and Dr. Schwaber that this is the best treatment for you, your case will then be presented to the St. Thomas Health Services Brain Tumor Board.

**CASE PRESENTATION:** The Brain Tumor Board consists of many physicians and specialists in neurosurgery, pathology, radiology, oncology, radiation oncology and neurotology. These specialists discuss your case and again, options are reviewed. A treatment plan is designed and a nurse case manager will contact you with appointment availability and instructions. This usually occurs within 3 to 5 working days.

**RADIATION ONCOLOGY SCREENING:** You will be directed to the Dan Rudy Cancer Center at St. Thomas Hospital where you will undergo the scanning that is required before treatment as well as be fitted for a localizing facial mask. You will also meet the radiation oncologist and staff at this visit.

Dr. Schwaber will then work with the computer programs and the scans to outline and plan your treatment. The importance of such specific planning is to design to plan for targeted radiation to protect your facial nerve, cochlea, and brainstem. When this is completed, your treatment can begin.

**TREATMENT:** You will undergo treatment at the oncology center. This may include 1 to 5 treatments, depending upon the size of your tumor. This usually takes only a few hours each day and you may return home following completion of your treatment.

Follow up treatments will include a repeat MRI in 6 months, hearing tests and examinations. Most patients are followed at 3 to 5 year intervals in the longer term.