

THE MANAGEMENT OF ACOUSTIC NEUROMAS IN A GERIATRIC POPULATION

Silverstein H, Norrell H, Jones R.

Neurological surgery of the ear and skull base. Berkeley (CA): Kugler & Ghedini Publications; 1989 p.197-201.

The wide availability and safety of new diagnostic studies including computerized tomography (CT) and magnetic resonance (MR) scanning, and the increasing interest in geriatric medicine, has resulted in the discovery of an increasing number of older patients with acoustic neuromas. In years past, many older patients with a significant neurological deficit would have been considered too fragile to undergo pneumoencephalography or ventriculography, much less intracranial surgery.

The ready availability of scanning has also produced another category of patients found to have "incidental" acoustic neuromas. Older patients with longstanding hearing loss who have scans for unrelated reasons, may be found to have acoustic neuromas.

Experience over 17 years in treating 40 patients over age 65 having acoustic neuromas has allowed us to reach important conclusions which can maintain an excellent quality of life for the geriatric patient with an acoustic neuroma.