

Craniopharyngioma

Series N.13



Patient's Guide

Easy Readability Leaflet

Craniopharyngioma - Series 13 (Revised August 2006)

This leaflet was produced by Fernando Vera MSc and Prof Gary Butler at the Institute of Health Sciences, University of Reading, Reading, UK (August, 2006). Some portions of the text were extracted or modified from the Growth and Growth Disorders Booklet Series (Third edition, 2000)* and may be used in conjunction with these as they provide a choice of leaflets providing the same information, but for people of different ages and reading abilities. The numbering sequence in each series is the same for easy cross-reference. The original leaflet series can be also obtained from the links given at the end.

All illustrations were created and produced by Fernando Vera MSc.

This leaflet is part of the Hormone Disorders Leaflet Series. The following are also available:

- Series N 3.** Puberty and the Growth Hormone Deficient Child.
- Series N 4.** Precocious Puberty
- Series N 5.** Emergency Information for Children with Cortisol and GH Deficiencies and those Experiencing Recurrent Hypoglycaemia.

- Series N 6.** Congenital Adrenal Hyperplasia
- Series N 7.** Growth Hormone Deficiency in Young Adults.
- Series N 10.** Constitutional delay of growth and puberty
- Series N 11.** Multiple Pituitary Hormone Deficiency
- Series N 12.** Diabetes Insipidus
- Series N 13.** Craniopharyngioma
- Series N 14.** Intrauterine Growth Retardation or Small Gestational Age
- Series N 15.a.** Hyperthyroidism
- Series N 15.b.** Hypothyroidism
- Series N. 16.** Type 2 Diabetes and Obesity

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Hello!

Today we'll tell you about **Craniopharyngioma** but known just as **Cranio**. You may think that it sounds a bit difficult, but do not worry! We'll tell you what it means, why it happens and how doctors treat it. But first, let's talk a bit about your body...

Your body is made up of millions of building blocks called cells. Like building blocks, cells work together towards a common goal.

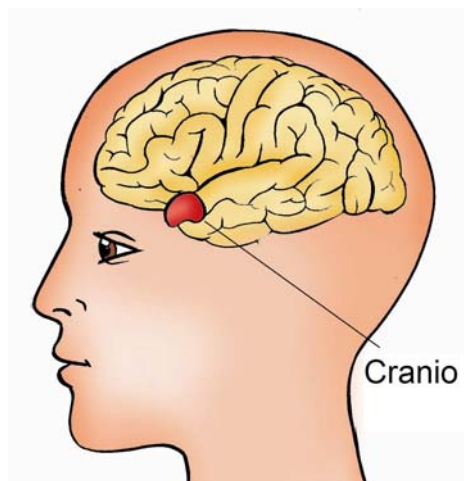
Their goal is to grow together and create the muscles and the organs such as the heart.



What is a Cranio?

Sometimes cells behave strangely. They grow together to create a lump with no function in your body. This lump is known as a **tumour**. A Cranio is a tumour that appears in the brain.

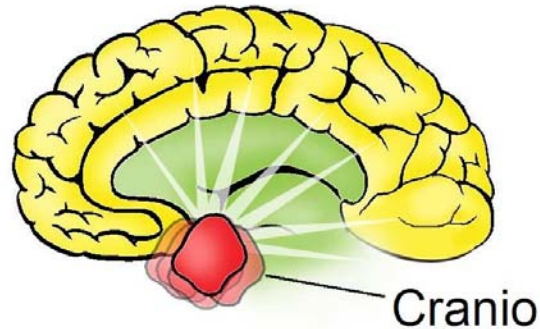
It is a benign tumour, so it doesn't spread to other parts of the body like cancer does. Doctors still don't understand why this happens. But they do know that a Cranio can be tricky to treat.



Why is a Cranio tricky?

The brain is one of the most important organs in your body. It has many sensitive parts.

A Cranio is tricky because as it grows around your brain it begins to push and shove these sensitive parts. This pushing may hurt the brain and make you sick in different ways.



How does a Cranio feel like?

The Cranio could make you sick since it hurts some of the brain's sensitive parts. As a result, you may feel the following:

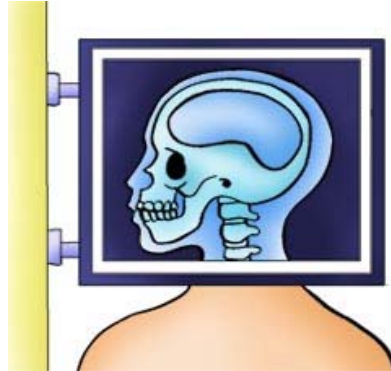
- Headaches: You may feel headaches.
- Vision: Your vision may not be as good as before.
- Growth: You may be shorter than your friends
- Thirst: You may feel very thirsty and wish to use the toilet many times.



How can doctors detect a Cranio?

Doctors will use the following cameras to see inside your brain and look for any tumours:

- Head x-ray: This test is just a picture of your Head.



- Brain scan: Better than an x-ray, this special camera lets doctors see images of your brain.

They may also take a bit of your blood with a needle. Don't worry this won't hurt; they will put some special cream on your skin, so you won't feel the prick at all!

How is a Cranio treated?

Since a Cranio may hurt your brain, it must be taken out. This is done in an operation called a **Craniotomy**.

After this operation, you may need to stay in the hospital for a couple weeks or so. During this time, doctors will often check on you to be sure you feel better.

What happens after the Cranio has been treated?

After treatment, you will still need to visit hospital a few times. This is because the Cranio sometimes grows back or because some bits and pieces could still be there.

If doctors see that a new Cranio is growing, they may give you a **radio-therapy**. This means that x-rays will be used to treat the new Cranio. It's not an operation. You will have several visits to hospital for this. Each visit will be short.

What medication is needed after treating a Cranio?

The brain acts like the “boss” by ordering other organs to do small jobs. One of these jobs is to keep a good control of your body’s water balance. Your brain does this by creating and sending water messengers to the other organs.

These messengers tell organs when to hold or when to get rid of water by making you go to the toilet. If the brain is hurt, no water messengers are created or sent and the body cannot keep a good water balance.

This bad water balance is called **water diabetes**.

To fix this, you will need to take some medicine. This medicine is called **DDAVP** and contains new water messengers that your brain can use to send around your body.



What other medications are needed?

Your brain may not be making another type of messenger called **Growth hormone**. You may need to take medicine to help you grow. Other messengers that may fail include **thyroid** and **sex hormones**.

What will I feel after the Cranio?

- You could feel hungrier than before, or very sleepy.
- You may not feel as hot or as cold as others.
- You may forget some things that you just learned.

If you experience a couple or all of these things, don't be afraid. These are common effects of the Cranio. Remember to tell your parents or your doctor about them.

Congratulations!

Now you know about a Cranio, why it happens and how it's treated. If you have not understood some things in this leaflet, don't feel shy to ask your doctor or other friendly people in the hospital. They will happily explain these or any other doubts you may have.

