Hello!

Today we’ll tell you about Craniopharyngioma, which is called 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 unwell in different ways.

How does a Cranio feel?

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:

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

They will do a blood test too. This test is very simple and they only need a little bit of your blood.

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 of 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 questions you may have.
Craniopharyngioma
(Revised November 2019)

This leaflet is part of the Hormone Disorders Series

The following are also available:
- Growth Hormone Deficiency
- Puberty and the Growth Hormone Deficient Child
- Precocious Puberty
- Emergency Information for Children with Cortisol and GH Deficiencies and those Experiencing Recurrent Hypoglycaemia
- Congenital Adrenal Hyperplasia
- Growth Hormone Deficiency in Young Adults
- Constitutional Delay of Growth and Puberty
- Multiple Pituitary Hormone Deficiency
- Diabetes Insipidus
- Intrauterine Growth Retardation or Small for Gestational Age
- Hyperthyroidism
- Hypothyroidism
- Type 2 Diabetes and Obesity

The development of these leaflets was funded (as a service to medicine) by Merck. They are based on the original booklets series devised by the UK Child Growth Foundation and the BSPED, and the previous adaptations for easy and average readability levels by ESPE.