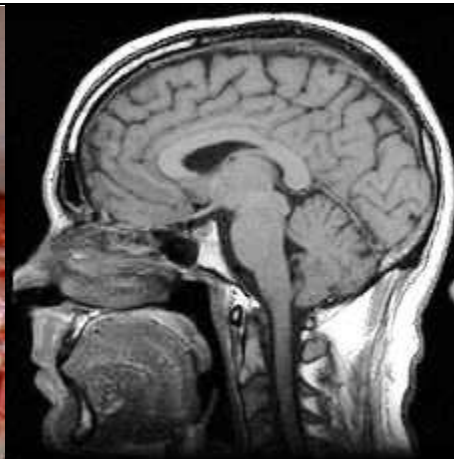
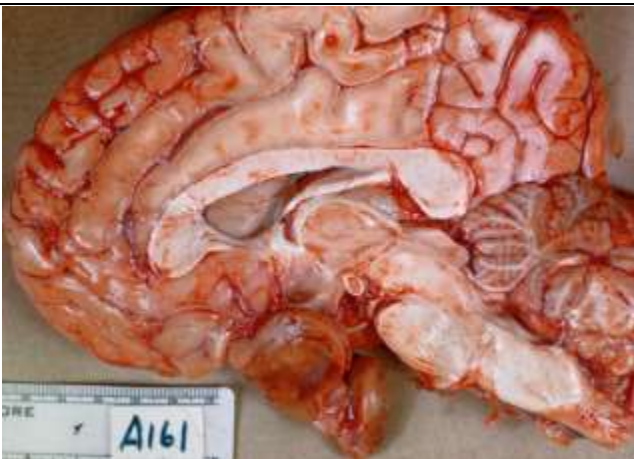
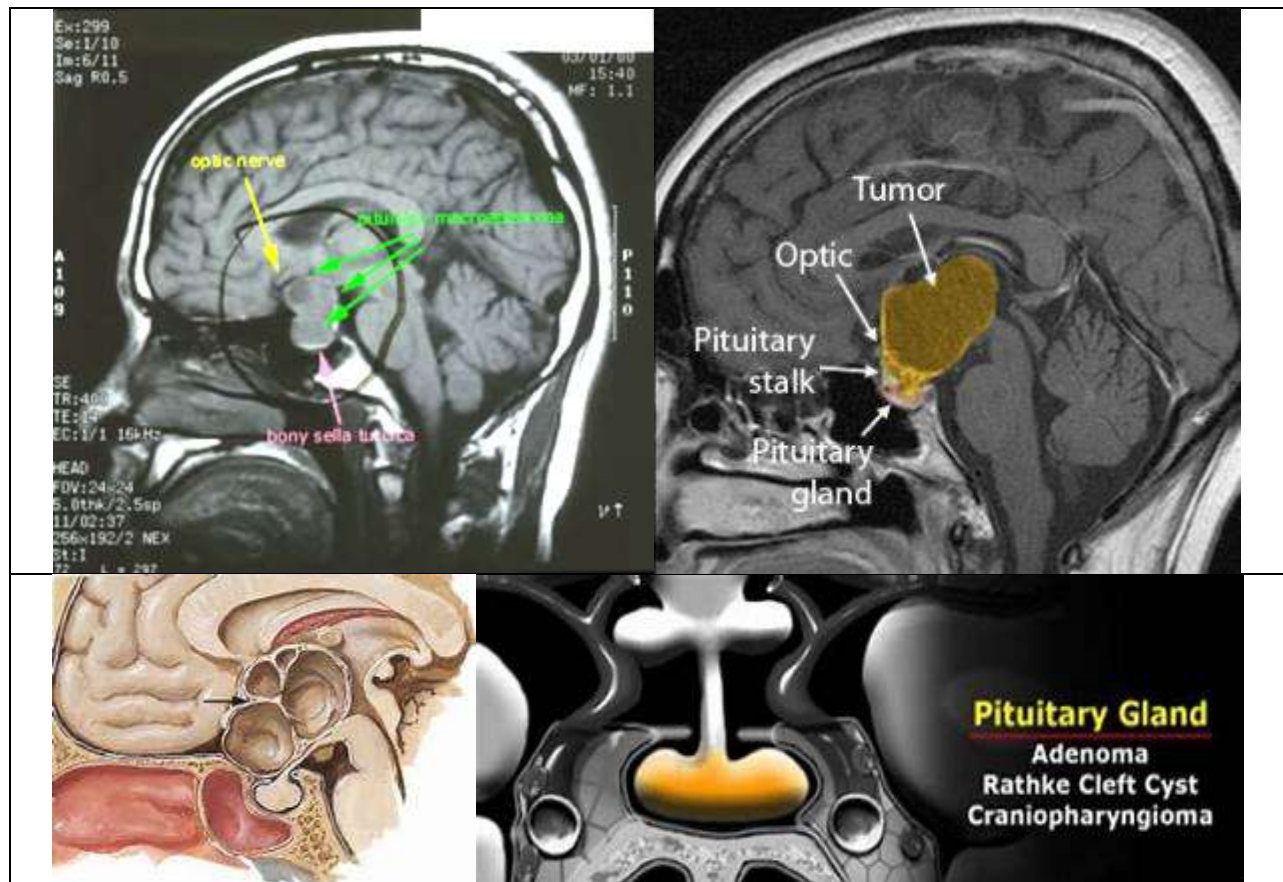


XXIII. Diseases of the Endocrines

IV. Hypophyseal-duct tumour

- (supra-sellar tumour = craniopharyngioma = Rathke's pharyngeal pouch tumour)
 - 3% of intracranial neoplasms.
 - **Origin:** Remnants of the primitive duct of hypophysis
 - **Site:** Above diaphragma sellae
 - **N.E.A.:**
 - Small in size (or big and flattens the pituitary).
 - Solid opaque white or cystic **and because of poor blood - supply** → **degenerative changes**, cyst formation, mucoid material and calcification.
 - **Nature:**
 - Resembles the reticular type of basal cell carcinoma (or the adamantinoma).
 - **Effects:**
 - Usually under 15 years of age; the tumour grows upwards into the third ventricle → **hydrocephalus of lateral ventricles**.
 - **Hypopituitarism**
 - (Retarded growth; sudden obesity; amenorrhea; impotence; loss of hair).
 - **Hypothalamic syndrome** (polyuria; sleepiness').
 - **Neighbouring symptoms**
 - (Primary optic atrophy; bitemporal hemianopia; headache).
 - **Symptoms of cerebral tumours**



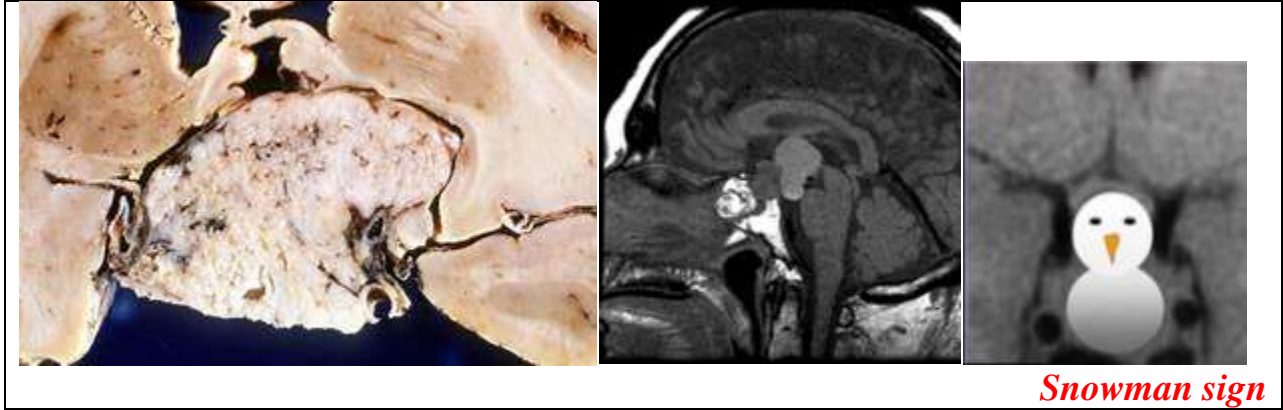


CRANIOPHARYNGIOMA

<p>Slow growing brain tumor derived from pituitary gland</p>	<p>Also known as Rathke pouch tumors or adamantinomas</p>	<p>Affects 2 in 100,000 people</p>	<p>Represents 2-5% of all primary brain tumors</p>
<p>Constitutes 5-10% of all childhood brain tumors</p>	<p>More common in children or elderly</p>	<p>Symptoms are fever, fatigue, stunted growth, increased urination & thirst</p>	<p>Diagnosed by history, radiological examination & biopsy</p>
<p>Treated by surgery with adjuvant chemo radiotherapy</p>	<p>Large tumors lead to vision - related complications</p>	<p>Benign but are known to recur after surgical removal</p>	

V. Secondaries:

- *Very rare; occur mostly in the posterior lobe; the primary is usually carcinoma of lung or breast.*
- *Effects: Hypopituitarism.*



Snowman sign