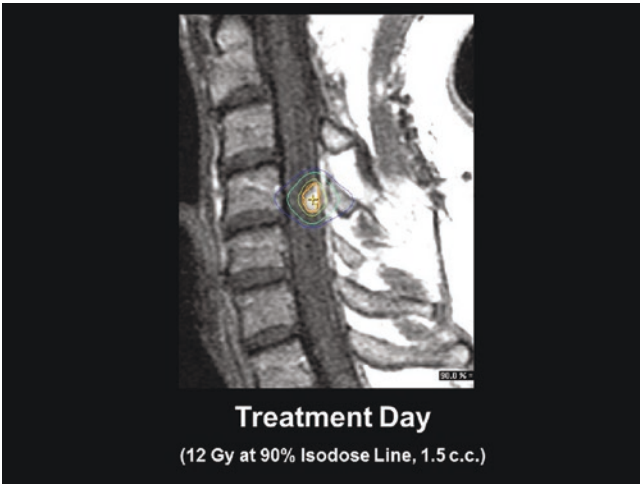
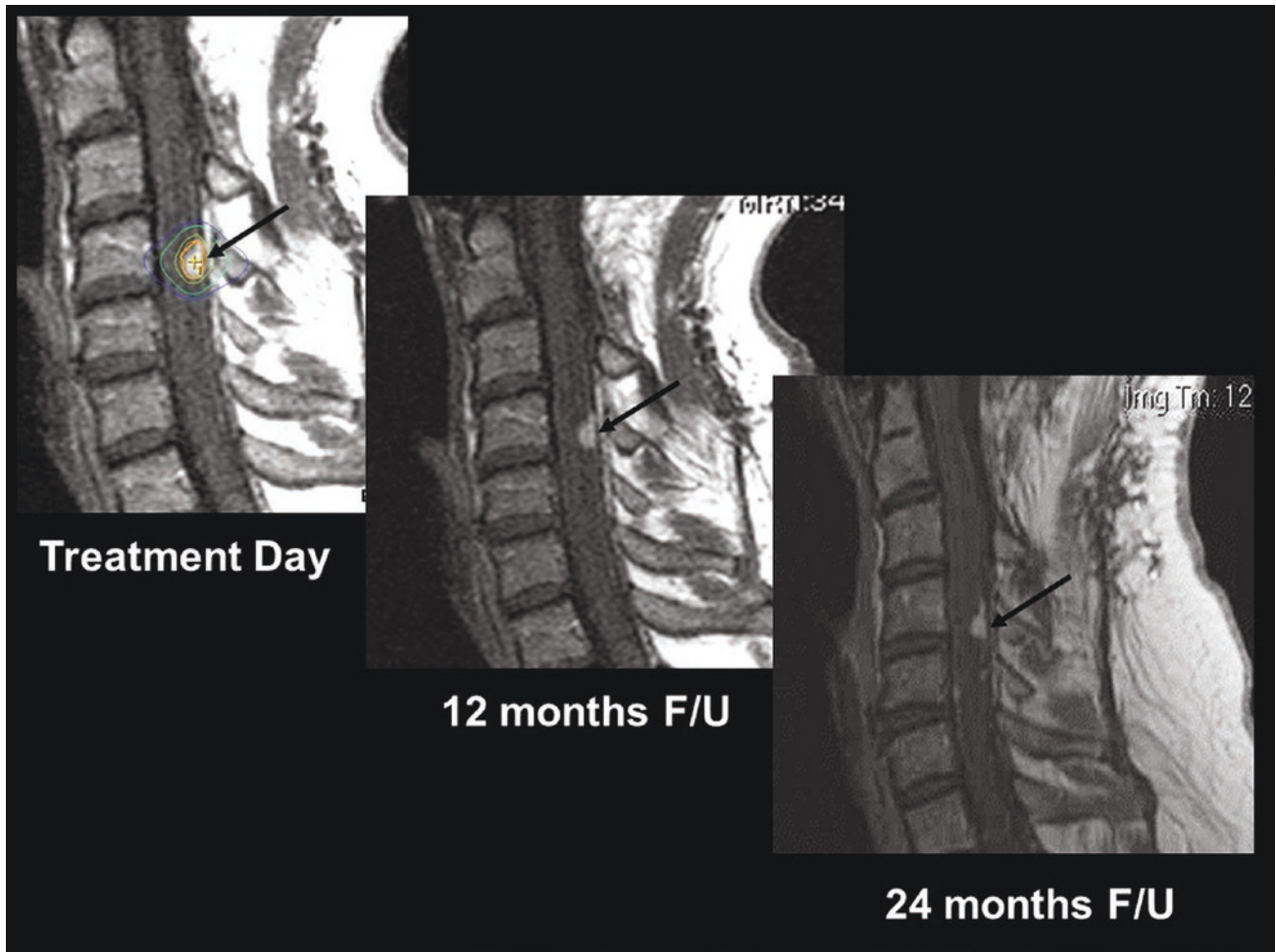




- **Demographics:** Female; 42 years
- **Initial Presentation:**
 - Asymptomatic
 - On regular follow-up after prior treatments of intracranial multiple hemangioblastomas
- **Diagnosis:** Spinal cord hemangioblastoma
- **Pre-radiosurgery Treatment:** Surgery and radiation therapy of other intracranial multiple hemangioblastomas; 8 years before radiosurgery treatment
- **Pre-radiosurgery Presentation:** Asymptomatic (accidentally discovered, at 8 years follow up imaging, after prior treatments of intracranial multiple hemangioblastomas)
- **Radiosurgery Treatment:**
 - Upfront (Primary); Linac-based (Shaped-beam) SRS for cervical spinal cord (C4) hemangioblastoma
- **Radiosurgery Dosimetry:**
 - Target volume: 1.5 cc
 - Marginal dose: 12.0 Gy
 - Marginal isodose: 90%
 - Maximum dose: 13.3 Gy
 - Minimum dose: 12.0 Gy
 - Average dose: 12.7 Gy
 - Number of isocenters: 1
- **Follow-Up Period:** 24 months post-SRS
- **Clinical Outcome:**
 - 12 months post-SRS: Asymptomatic
 - 24 months post-SRS: Asymptomatic
- **Complications:** None
- **Radiological Outcome:**
 - 12 months post-SRS (MRI): Mild decrease in tumor size
 - 24 months post-SRS (MRI): More decrease in tumor size
- **Post-radiosurgery Treatment:** Continued clinical and radiological follow-up





Further Reading

- Avanzo M, Romanelli P. Spinal radiosurgery: technology and clinical outcomes. *Neurosurg Rev.* 2009;32(1):1–12; discussion 12–13, 1.
- Bridges KJ, Jaboin JJ, Kubicky CD, et al. Stereotactic radiosurgery versus surgical resection for spinal hemangioblastoma: a systematic review. *Clin Neurol Neurosurg.* 2017;154:59–66.
- Daly ME, Choi CY, Gibbs IC, et al. Tolerance of the spinal cord to stereotactic radiosurgery: insights from hemangioblastomas. *Int J Radiat Oncol Biol Phys.* 2011;80:213–20.
- Hernández-Durán S, Hanft S, Komotar RJ, et al. The role of stereotactic radiosurgery in the treatment of intramedullary spinal cord neoplasms: a systematic literature review. *Neurosurg Rev.* 2016;39(2):175–83; discussion 183.
- Liu EK, Silverman JS, Sulman EP, et al. Stereotactic radiation for treating primary and metastatic neoplasms of the spinal cord. *Front Oncol.* 2020;9(10):907.
- Selch MT, Tenn S, Agazaryan N, et al. Image-guided linear accelerator-based spinal radiosurgery for hemangioblastoma. *Surg Neurol Int.* 2012;3:73.