Overview:

Tumour Group: Gilomas

WHO Grade: Grade II

Prevalence/Incidence: Diffuse astrocytomas represent 10-15% of all astrocytic brain tumours, with an incidence of approximately 1.4 new cases per 1 million population per year.

Typical Age Range:
The peak incidence is in young adults between the ages of 30 and 40 (25% of all cases). Diffuse astrocytomas are uncommon in children. The mean age of occurrence is 34 years.

Description of Tumour:
As the name implies, the borders of a diffuse astrocytoma tend to infiltrate into surrounding normal brain tissue. This tumour is also called low-grade or astrocytoma grade II, and is more common in men than women.

This type of tumour tends to contain microcysts and mucous-like fluid. They are grouped by the appearance and behaviour of the cells for which they are named. Brain tumour experts agree that while diffuse astrocytomas are usually slow growing, they should not be considered “benign” or “non-malignant.”

Grade II astrocytomas make up about 25% of all gliomas. They may be found anywhere in the brain, but are most common in the cerebral hemispheres - the “thinking” part of the brain.
Additional support, information and education offered by Brain Tumour Foundation of Canada:

Adult, Pediatric and Non-Malignant Brain Tumour Handbooks available in English and French.

“A Friend in Hope” children’s storybook available in English and French.

20+ Adult Support Groups across Canada (in-person and virtual)

Toll-free information and support line

BrainWAVE Pediatric Support Program

Print BrainStorm Newsletter
Email Newsletters:
  • E-BrainStorm
  • Peace of Mind

“Grey Matters” Blog

Symptoms:
Common symptoms include, but are not limited to:

• Changes in sensation
• Changes in vision
• Headaches are often the earliest signs of this tumour
• Seizures (common presenting manifestation of the tumour)
• Speech difficulties
• Weakness on one side of the body (hemisparesis) is common.

Treatment/Standard of Care:
Treatment options depend on the overall health of a person, the type, size and location of the tumour, if and how far it has spread and previous treatments received. The molecular profile may also guide treatment decisions.

Options may include radiation, chemotherapy, or even careful observation.

Prognosis:
In adults, a diffuse astrocytoma almost always transforms into a higher grade tumour.

For more details, please refer to braintumour.ca.