

For additional

Information Sheets or to

learn more about other

Brain Tumour Foundation

of Canada Information

Sheets are provided as

an informational and

educational tool and are

not intended to replace

the advice or instruction of a professional healthcare

practitioner, or to substitute

for medical care. We urge you to seek specific medical

advice on individual matters

Brain Tumour Foundation

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tireless dedication of donors

of Canada is generously supported by individuals,

groups. It is through the

that help is available for anyone affected by a brain tumour, including patients, survivors and their

of concern.

loved ones.

visit www.BrainTumour.ca

brain tumour topics,

Brain Tumour Types Info Sheet

Brain Cysts

Overview:

Tumour Group: Other Brain Tumours and Related Conditions

Description of Tumour:

Cysts are abnormal accumulations of fluid enclosed in a lining. They may contain blood, tissue or tumour cells. There are specific cysts that are named for their types of tissue and their content.

Arachnoid Cyst

Arachnoid cysts are congenital in origin and may occur anywhere in the brain. In children, they most commonly arise in the back of the brain and in the region of the third ventricle. They are cerebrospinal fluid (CSF)-filled cysts that are lined with the arachnoid membrance (one of the three meningeal coverings). Some arachnoid cysts are self-entrapped fluid which may block the CSF pathways, producing hydrocephalus.

Colloid Cyst

These cysts usually occur in the third ventricle and can cause hydrocephalus. They contain embryonic tissue (tissue formed before birth). Treatment includes surgery and sometimes shunting.



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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

All patient resources are available free-of-charge in Canada. Call 1-800-265-5106 or visit www. BrainTumour.ca for additional details and information.

Dermoid and Epidermoid Cyst

These cysts develop from congenital tissue (formed before birth). Epidermoid cysts contain keratin, cellular debris and cholesterol. Dermoid cysts contain hair and seaceous (sweat) glands. These masses occur in central areas of the brain such as the hypothalamic region, the vermis of the cerebellum and the pineal region. The bones of the skull (not involving the brain itself) and the spine may also be involved. These cysts are treated with surgery and complete removal is usually possible.

Rathke Cleft Cyst (Rathke Pouch Cyst)

During development, the pituitary glad develops from two components. The anterior portion develops from the roof of the mouth, and the posterior portion from the brain itself.

Occasionally, non-malignant cysts develop from the fragments of tissue that initially had lined the mouth. These cysts have no solid component and are fluid filled sacs with a very specialized lining that secretes fluid. These cysts are always in the area of the pituitary gland and can be large. Treatment is surgical removal. At times a shunting procedure may be necessary.

Teratoma

This is a congenital tumour, which is made up of elements from the three primary cell layers. Ectoderm (skin and nervous system), Mesoderm (muscle, bone and cartilage) and Endoderm (gut lining). These are the earliest cell types in development. It is most commonly a tumour of the pineal gland or lower spinal cord in the central nervous system, but may be found near the base of the brain near the pituitary gland, or the base of the third ventricle. Treatment is usually surgery.

For more details, please refer to braintumour.ca.



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