

16th World Congress on Tissue Engineering, Regenerative Medicine and
Stem Cell Research

6th World Congress on Oncology and Cancer Research

MAY 12, 2022 | Webinar

Brain stem tumours, chemotherapy and chemo brain

Suhasish Ray

Vivekananda Institute of Medical Sciences, India

Brain stem tumours are diverse and most common solid tumour of childhood. Mostly high grade glioma, medulloblastoma and ependymoma. Operative as well as diffuse brain stem lesion is treated with chemotherapy. Operative approach is posterior. Molecular grading is a novel and new approach to diagnostics and therapeutics. During surgery DTI and fMRI provide a safe trajectory. Midline gliomas are often non resectable while deep tumours may be. Often conventional chemotherapy are suboptimal is intra-arterial chemotherapy is a better way of targeting the lesion through fine catheters through the subclavian and the basilar artery. Selumetinib is an immunotherapeutic drug with potential compared to Trametinib. IDH1 Mutations are common in primary malignant gliomas in adolescents than young and with improved prognosis. Prognostic benefits of resection in medulloblastoma depend on molecular subsets often. Molecular biology may replace conventional risk stratification. Ependymoma is now recognized to encompass 9 genomically distinct subsets with different treatment approaches. Chemo brain is mental alterations post chemotherapy in brain tumours. May be demyelination, inflammation, microvascular injury, mostly frontal prefrontal white matter. Not everyone is affected. Dose dependent. Cognitive changes. May not

fully recover. Fatigue, sleep disturbance, behaviour changes. Sexual changes, psychostimulants, antidepressants, sleep aids memory drugs may help. Good sleep is always a panacea as it exercises, good food. It is basically a misnomer mixed with lot more than we can comprehend.

Speaker Biography

Suhasish Ray completed his post-graduation in orthopaedic surgery in 2001. After a brief stint as visiting Orthopaedic surgeon in government hospitals he completed his MCh in Orthopaedic surgery from Edinburgh in 2009 with special emphasis on spinal surgery. Having returned to Kolkata he was visiting Orthopaedic surgeon in reputed corporate hospitals. Inclined on correlating psychological association with spinal and central nervous pain he completed his MSc in clinical psychology from Annamalai University in 2016. In the meantime he did fellowship in anterior and posterior instrumentation in spinal surgery from Innsbruck Austria, Bombay Hospital, Mumbai and spinal microsurgery from Ganga Hospital Coimbatore. He is a practicing spinal surgeon with special interest in spinal oncology from Nanavati Hospital Mumbai. Presently he's spinal and skull base oncosurgeon from Kolkata, India. He was conferred a Honorary Doctorate in Spinal surgery from Innsbruck University, Austria in 2021. He's the guest Professor of Orthopaedic and Neurosurgery in West Bengal University of health sciences, India.

suhasishray@gmail.com

Received date: May 3, 2022; **Accepted date:** May 5, 2022; **Published date:** May 24, 2022