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Late Radiation Induced Brain Necrosis with Vasogenic Eodema

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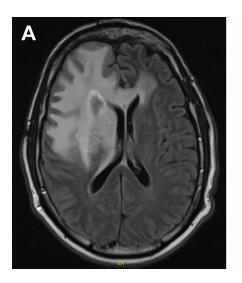
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Introduction

A 56-year-old man presented to the hospital with a second episode of confusion while on a tapering dose of dexamethasone. Previously, he underwent bifrontal craniotomy and radiotherapy for a WHO grade 2 meningioma, concluding in April 2022. Two months before this presentation, a similar episode led to admission. A new frontal lesion with vasogenic edema, noted with MRI, revealed T2/FLAIR hyperintensity in the frontal pole, insular cortex, and parietal lobe, corresponding to the prior radiation field (Panel A,B). The Neuro-

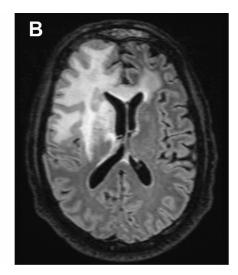
oncology MDT suggested the diagnosis of late radiation-induced necrosis. Dexamethasone initially relieved symptoms, but its withdrawal caused a second episode with disorientation, memory loss, and reduced mobility.

Upon the current admission, a weaning plan of dexamethasone before the next outpatient review and consideration of Bevacizumab in case symptoms reoccur post-steroid cessation were initiated. A biopsy was deemed unnecessary unless symptoms persisted post-Bevacizumab trial, as agreed upon in the second MDT meeting.



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