

Decisions on future childbearing in women diagnosed with a meningioma

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The diagnosis of a brain tumor—even one that's usually "benign" and slow growing such as a meningioma—can be scary. Meningiomas can cause temporary and permanent side effects and sometimes may recur even after surgical removal. In addition, a small percentage of primary or recurrent meningiomas are malignant. Imagine yourself a female meningioma survivor in your childbearing years. Some reports indicate that pregnancy may be a risk factor for tumor progression or recurrence. What do you do?

Researchers from Moffitt Cancer Center in Tampa, Florida, developed a survey to identify the impact of a meningioma diagnosis on women's views about reproductive choices. In a preliminary study, the researchers surveyed women who had received a diagnosis of meningioma to ascertain their personal attitudes toward childbearing and what influences, such as physician recommendations, may have played a role in these attitudes. The majority (70%) of surveyed female meningioma survivors 25 to 44 years of age claimed a strong desire to bear a child, and 27% of these respondents intended to have a baby in the future. Factors affecting these women's decisions are described in detail in "Birth desires and intentions of women diagnosed with a meningioma," by Michelle A. Owens, MA, Benjamin M. Craig, PhD, Kathleen M. Egan, ScD, and Damon R. Reed, MD, published today online, ahead of print, in the *Journal of Neurosurgery*.

Survey respondents were recruited from female meningioma survivors participating in the online support group Meningioma Mommas. One



hundred twenty-one respondents completed an online survey (known as the MMS), hosted by Meningioma Mommas, that included questions concerning their birth desires and intentions as well as whether the risk of tumor recurrence and/or physicians' recommendations influenced their decisions on reproduction. Sixty-one respondents were between the ages of 25 and 44. The researchers compared these women's responses with those of an age-matched group of women without meningioma who had participated in the 2010 National Survey of Family Growth (NSFG) and was deemed representative of the general population.

The researchers found that meningioma survivors who responded to the MMS were more likely to want a baby (70% vs. 54%) and intend to have a baby (27% vs. 12%) than women in the general population who responded to the NSFG. The meningioma survivors were also more confident about their intention to have a child (10% vs. 2%). The majority of respondents to the MMS (52%) reported that their physicians advised them about potential <u>risk factors</u> for meningioma recurrence. Nearly half of the respondents stated that <u>pregnancy</u> was one of those factors. The factor that most influenced childbirth intentions among the meningioma survivors was the risk of recurrent meningioma and the need for more treatment.

Although there have been case reports of concurrent meningioma and pregnancy, the researchers point out that there "are scant data on whether pregnancy induces the recurrence of meningioma."

Nevertheless, "nearly half (43%) of the MMS respondents aged 25-44 reported being told by a physician that pregnancy was a risk factor for recurrence, and approximately one-third (31%) reported that 'medical advice against pregnancy' influenced their birth desires and intentions."

On the basis of the findings of this small, preliminary study, the researchers suggest that a larger patient-centered outcomes research study should be conducted to find whether pregnancy increases the risks



of meningioma symptoms and recurrence. The results of that larger study would be beneficial in educating patients and physicians and would aid decision making about <u>childbearing</u> in this patient population.

Summarizing the results of this study, Ms. Owens states: "Survey results from Meningioma Mommas online support group participants aged 25-44 years suggest that meningioma survivors are more likely than their counterparts in the general population to want and intend to have a baby, despite the fear of recurrence among many of these women."

More information: Owens MA, Craig BM, Egan KM, Reed DR: Birth desires and intentions of women diagnosed with a meningioma. *Journal of Neurosurgery*, published online, ahead of print, January 27, 2015; DOI: 10.3171/2014.11.JNS14522

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