

# AB058. Giant bilateral intraventricle ependymoma in pediatric patient with essential tremor as a main symptom: a rare case report

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**Background:** Giant bilateral intraventricle ependymoma in pediatric patient is indeed a rare type of brain tumor that primarily affects children, accounting for about 5–10% of all brain tumors in children. It arises from ependymal cells, which line the ventricles of the brain and the spinal cord. Essential tremors in the tumor brain have been related to several brain areas, including the thalamus, cortex, globus pallidus, and cerebellum.

**Case Description:** We presented an 8-year-old boy with diagnosed ependymoma with essential tremor, double vision, and dyspnea as symptoms. The magnetic resonance imaging (MRI) with contrast showed the mass appears to be isointense with clear boundaries and regular edges; the impression comes from the bilateral ventricle lateral, which is welded to the bilateral thalamus. A surgical resection was performed in this case. The indication for surgery in this case was due to symptoms of shortness of breath and tremors that unstopped since 1 month ago. The surgery was performed with bilateral occipital craniectomies with the aim of facilitating access to the tumor and a bilateral occipital transcortical approach. Histopathological examination revealed support for an ependymoma.

**Conclusions:** Ependymoma, especially in children, has various symptoms based on the size, location, and extent of the tumor. MRI with contrast is the main modality for the diagnosis of ependymomas, followed by histopathological examination to confirm. Ependymoma should be

considered, and these tumors must be monitored routinely because they can recur. It should be conducted in a multidisciplinary manner to ensure excellent outcomes and avoid fatal complications.

**Keywords:** Giant bilateral pediatric ependymomas; essential tremor; occipital transcortical approach; case report

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## Footnote

*Conflicts of Interest:* Both authors have completed the ICMJE uniform disclosure form (available at <https://cco.amegroups.com/article/view/10.21037/cco-24-ab058/coif>). The authors have no conflicts of interest to declare.

*Ethical Statement:* The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved. All procedures performed in studies involving human participants were in accordance with the ethical standards of the institutional and national research committees and with the Helsinki Declaration (as revised in 2013). Written informed consent was obtained from the patient for publication of this case report and accompanying images. A copy of the written consent is available for review by the editorial office of this journal.

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