

Dear Editor,

I read with great interest the paper by Mitsos *et al.* describing a case of sphenoid wing meningioma and glioblastoma multiforme in collision [1]. Indeed, the occurrence of these kinds of tumours in the brain is very rare, but all the reported cases are not easily seen as they were published in a journal that is not indexed by Medline [2].

The authors reported that the collision of tumours might be metastatic and primary. The hypotheses that have been suggested in the literature – malignant transformation within the gliosis surrounding the benign lesion, the “irritating” behavior of the tumour, multicentric character of the tumor, and multi-factorial mechanisms – were discussed by the authors. The other possible mechanisms that have been speculated in the literature are possible genetic predisposition [3], surgical trauma [4] and ionizing radiation [5].

The authors speculated that the collision tumour in their case might have been caused by malignant transformation of the reactive gliosis surrounding the meningioma. As they mentioned, this hypothesis – malignant transformation of the reactive gliosis surrounding the meningioma – does not give a reliable explanation for the simultaneous appearance of the second lesion in the contralateral hemisphere as in their presented case.

One of the suggestions for the simultaneous appearance of these tumours is simple coincidence. Because both meningiomas and gliomas are relatively

common among the intracranial neoplasms, it may be reasonable to suppose such simple coincidence. This assumption is supported by the statistical analysis of Russell and Rubinstein [6].

Although there are many suggestions about the potential relationship between the collision tumours, still no accurate explanation is provided.

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References

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