Benign peripheral nerve sheath tumor

Benign peripheral nerve sheath tumors include schwannomas and neurofibromas.

The occurrence of benign peripheral nerve sheath tumors (PNSTs) is at least 85–90% of clinically symptomatic cases, and likely a larger percentage of subclinical cases ¹).

In normal patients, the majority of these tumors are histologically schwannomas, with lesser percentages made up of other benign lesions such as hemangiomas, ganglion cysts, desmoids, malignant peripheral nerve sheath tumors (MPNST’s), and other malignant lesions, such as lymphoma and metastases ²).

Differential diagnosis

Of clear importance is the ability to differentiate between benign and malignant peripheral nerve sheath tumor as early as possible in the clinical work-up and management of these lesions, as they are treated very differently, and exhibit very different clinical and intraoperative behaviors. Ideally, the probable diagnosis should be known prior to surgery, as malignant tumors are more likely to require aggressive resection and possibly amputation in order to achieve any degree of oncologic control of these aggressive tumors.

Treatment

Benign peripheral nerve sheath tumor treatment.

Outcome

Benign lesions, in contrast, are often able to be easily resected away from nerve fibers with minimum morbidity ³) ⁴) ⁵).

Case series

Benign peripheral nerve sheath tumor case series.

