Introduction

The problem of brain tumor grading has often been critically discussed in this journal. The first contribution in this issue takes a look at these problems from the viewpoint of the neuropathologist and presents suggestions for a new version of the WHO classification.

In the section containing Original Articles we have a total of 6 contributions with a relatively broad spectrum of clinical topics. A Japanese work group reports on the relatively rarely found vein malformations in the supra- and infratentorial space. Considering the fact that venous angiomas are usually asymptomatic, the necessity to operate is questioned.

Interesting is the suggestion of a Swiss group that acetylsalicylic acid might be a risk factor for intracranial bleeding after head injury.

Important for the neurosurgeon are the studies on 183 patients with subarachnoid bleeding from a source not demonstrable on immediate angiographies. Later control angiographies demonstrated the source of bleeding in 143 patients, and a third angiography showed the source in another 18 patients. The results again confirm that certain subarachnoid bleeding requires at least one angiographic control.

Just as important is a retrospective study of a group of patients with spontaneous intracerebral bleeding. A comparison of operated and conventionally treated cases suggests that, the indication for operation is well considered, the operated patients seemed to do better.

A further contribution reports on the use of transcranial Doppler sonography, a treatment which has already proven indispensible for cerebral vasospasm in connection with subarachnoid bleeding, for malformations in the area of the internal carotid and the medial cerebral artery. The results are, in part, correlated with the results of CBF analysis. They demonstrate the usefulness of this technique for the indication mentioned.

Finally we considered a contribution by Turkish authors which reports bullet injuries to the brain to be of interest, even though such injuries are rare in countries such as Germany. In the case of war injuries, however, we question whether diagnostic and therapeutic procedures actually achieve a better prognosis.

The contribution in the section on Basic Research investigates questions concerning methods of rCBF for arteriovenous malformations. The results of the use of the 133-Xenon inhalation technique are compared with the results of xenon CT and SPECT.

Four Case reports on widely differing cases complete this issue.

The broadness of the topics considered in this issue emphasizes the fact that the neurosciences contribute indispensible knowledge for the practice of neurosurgery.