FactSheet



Issues to Consider When Choosing a Brain Tumor Treatment Center

any brain tumor patients and their family members contact the National Brain Tumor Foundation with questions about how to choose a doctor and medical team. In response to this need, NBTF has developed a list of important issues to consider when choosing who will care for you.

How Many Brain Tumor Patients Does the Medical Center Diagnose and/or Treat Per Year? What Types of Brain Tumors?

(Please take into consideration size of both institution and department.)

For pediatric patients: Does the institution treat children and/or adults? (Providers will frequently specialize in either one or the other, but in some smaller institutions this is not possible.)

How many second opinions do they give per year?

What is their procedure for giving a second opinion? (Please remember: a second opinion is an important tool for evaluation.)

Which of the Following Specialists Are Included on the Treatment Team?

(A multi-disciplinary treatment team, made up of various specialists, is generally considered the preferred approach, although with smaller institutions this may not be possible.)

 Neuropsychologist: A licensed psychologist who has specialized in studying how the brain functions and the impact that damage to the brain has on one's abilities. (Please note that although neuropsychologists are frequently not consulted until after treatment, it may be preferable to do so from the beginning so that a more accurate baseline can be established before treatment.)

- Neuro-oncology Nurse Specialist: A licensed nurse specializing in patient education and support services for brain tumor patients. Available for consultation on symptom management.
- **Neuro-oncologist**: An oncologist (cancer doctor) specializing in the treatment of cancers and tumors affecting the brain, the spinal cord, and the nervous system.
- **Neurologist:** A doctor specializing in the diagnosis and treatment of disorders and diseases affecting the brain, the spinal cord, and the nervous system.
- Neuropathologist: A doctor specializing in the diagnosis of neurological disorders and diseases through microscopic examination of biopsied tissues (cells from the tumor).
- Neuroradiologist: A radiologist who specializes in the interpretation of diagnostic images—such as computerized tomography (CT) scans and magnetic resonance imaging (MRI)—of the brain, spinal cord, and nervous system. A neuroradiologist may also administer radiation therapy; see Radiation Oncologist.
- **Neurosurgeon**: A surgeon specializing in the diagnosis, treatment, and surgical management of disorders and diseases of the brain, spinal cord, and nervous system.
- **Radiation Oncologist:** A doctor specializing in the administration of radiation therapy.

Does the Medical Center Have a Brain Tumor Board or Other Formal Mechanism for Interdisciplinary Consultation?

How Does the Medical Center Keep Up to Date With Current Research?

If it is a small facility, does it consult with larger research institutions? With which institutions does it consult?

What Types of Imaging Technologies Does the Center Have Available?

(When it comes to diagnostic imaging, you need the best scan possible. A CT scan is often not sufficient.)

- Magnetic Resonance Imaging (MRI): A three-dimensional imaging technique used to diagnose and monitor brain tumors. With this technique, magnetic fields, rather than radiation, are used to make a picture, or MR image, of an area of the body. Images can be made along multiple geometric planes, showing thin "slices" of brain. This technique provides very clear images and allows for the exact localization of tumors and visualization of small lesions that may not appear on CT scans. Sometimes a contrast agent called gadolinium may be used to enhance the appearance of the abnormality; in rare cases some people report a temporary headache, but otherwise it has no known side effects.
- Positron Emission Tomography (PET): A relatively new test that measures cellular activity. An injection of radioactive glucose dye is given to the patient and then a scan is made; since malignant tumor cells metabolize glucose more quickly than healthy cells, they also take up more of the radioactive marker. These "hot spots" of high glucose metabolism then appear on the scan. This technique can be especially useful in distinguishing dead tissue masses from active tumor cells although this test is not always 100% accurate.

Does the Center Participate in Clinical Trials?

(A clinical trial is experimental research that involves treatment for brain tumors.)

What type of trials?

National Cancer Institute-sponsored and/or pharmaceutical industry trials?

How many different trials? A positive response may reflect the institution's commitment to research.

What Sort of Rehabilitation Services Does the Center Offer?

- Does it have a physical therapist?
- Does it have a speech therapist?
- Does it have an occupational therapist?
- Does it have a neuropsychologist?

What Kind of Emotional and Social Support Services Does It Offer?

- Social worker?
- Chaplain?
- Support groups? (general cancer or brain tumor-specific?)
- Local resource directory or information referral network?
- Caregiver assistance programs?
- Housing assistance (i.e., places to stay while receiving medical care far from home)

What Support Services Are Available on an Out-Patient Basis?

(These may be things that you can utilize even before treatment.)

- Educational sessions?
- Informational literature, brochures, etc.?

Is There a Mechanism in Place for Evaluating Patient Satisfaction?

Does the Center Have a Patient Relations Representative or Ombudsman Program?

Developed by the Patient Services Advisory Board of the National Brain Tumor Foundation: Art Lamon; Mary Lovely, RN, PhD; Helen Pellegrin, PhD; Colleen Reimer; Carolyn Russo, MD; Craig Schwarberg; Genny See-Tho, RN; Joanie Taylor, RN; Jamie Vavaroutsos, LCSW; and Nora Wu, MD. NBTF Staff: Elizabeth Carson; Robert Tufel, MSW, MPH.

The information in this publication is subject to change. The reader is advised that information obtained from a physician should be considered more up-to-date and accurate than the information in this publication and that this publication does not and cannot purport to address facts and circumstances particular to any patient. This is something that can only be done by the patient's physician. Sponsorship of this publication does not imply the National Brain Tumor Foundation's endorsement or recommendation of any particular form or forms of therapy, regimen, or behavior.

The National Brain Tumor Foundation (NBTF) was founded in 1981 as a non-profit organization by people whose lives were affected by brain tumor disease. NBTF provides support services for patients and their families and raises funds for research to treat and cure brain tumors. For more information call 800.934.CURE. NATIONAL BRAIN TUMOR FOUNDATION 414 Thirteenth Street, Suite 700, Oakland, CA 94612-2603 Tel: 510.839.9777 Fax: 510.839.9779 Web Site: www.braintumor.org E-mail: nbtf@braintumor.org 800.934.CURE