

## Special Issue

# Management of Brain Tumors in Children

### Message from the Guest Editor

Pediatric brain tumors are the most common solid tumors in children. They are a source of great concern and anxiety to the children and their parents and caregivers. Fortunately, there have been rapid developments in our understanding and treatment of pediatric brain tumors. Due to the large variety of these lesions, treatment options and approaches often vary greatly and are very much dependent on the type of tumor. The goal of this Special Issue of *Children* is to highlight recent advances in the management of brain tumors in children, such as the surgical management of different tumor types and locations, differences in the management of children vs. adult brain tumors, postoperative management and rehabilitation in children with brain tumors, complications associated with the management of brain tumors in children, adjuvant and neoadjuvant treatment of brain tumors in children, the effect of molecular diagnosis on the treatment of brain tumors in children, management of pediatric brain tumors in the transitional period to adulthood, management of incidentalomas/incidental low grade tumors in children, and malignant transformation of pediatric brain tumors.

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### Guest Editor

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### Deadline for manuscript submissions

closed (20 September 2022)



## Children

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## About the Journal

### Message from the Editor-in-Chief

You are invited to contribute a research article or comprehensive review for consideration and publication in *Children* (ISSN 2227-9067). *Children* is an open access journal—research articles, reviews, and other content are published online immediately after acceptance. The scientific community and the general public have unlimited free access to the content as soon as it is published. The journal focuses on sharing clinical, epidemiological, and translational science relevant to children's health. We would be pleased to welcome you as one of our authors.

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### Editor-in-Chief

Prof. Dr. Paul R. Carney

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