**INTRODUCTION**

- Craniopharyngiomas are intracranial tumors that develop from epithelial Rathke’s pouch rests. They have a bimodal age distribution, with peak incidence at childhood and in the adult/elderly, although in our series we have more patients in a middle peak.
- Usually they are benign but responsible for significant morbidity, particularly when located near critical structures such as optic chiasm, pituitary gland and hypothalamus, and thus might cause visual, neurological and endocrine deficits.

**HORMONAL EVALUATION:**

Subclinical hypothyroidism (started on levothyroxine therapy 50µg/day).

**PITUITARY MRI:**

Sellar and suprasellar cystic lesion with carotid involvement. This lesion was not completely excised, because of its adherence to internal carotid.

**HISTOLOGY:**

Craniopharyngioma adamantinomatous type.

<table>
<thead>
<tr>
<th>Value</th>
<th>Normal Range</th>
</tr>
</thead>
<tbody>
<tr>
<td>TSH</td>
<td>0.20 mUI/mL</td>
</tr>
<tr>
<td>FT4</td>
<td>0.73 ng/dL</td>
</tr>
<tr>
<td>FT3</td>
<td>1.91 ng/dL</td>
</tr>
</tbody>
</table>

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**CONCLUSION**

- Craniopharyngiomas are rare tumours, often with suprasellar extension. Early diagnosis and treatment require a high diagnostic accuracy when dealing with visual impairment, neurological and hormonal symptoms. They tend to invade locally and relapse after treatment, requiring a long follow-up.