I read with interest the paper by Krieger et al. [1]. I wish to challenge the recommendation made by the author in their conclusion that ‘follow-up MRIs should be obtained at regular intervals even with complete resections, a vigilance necessitated by the development of recurrent disease in 3 of our cases who had total resections’. This recommendation is not in keeping with the results of their study. As the authors state, none of the recurrences were detected on surveillance scans, and it would therefore be more reasonable to conclude that one should wait until the patients became symptomatic before repeating a scan.

Reference