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**[Frontal giant cell glioblastoma: Radio-induced tumor? Case report and literature review.]**

[Article in French]

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The current WHO classification recognizes two distinct variants of glioblastoma multiforme (GBMs): giant cell glioblastoma (GCG) and gliosarcoma, based on histological heterogeneity. Unlike conventional GBMs, GCGs preferentially occur in younger individuals and are associated with a better prognosis, a few reports documenting prolonged survival up to 17 years after diagnosis. However, transformation to gliosarcoma is possible and has been already reported. Radio-induced glioblastoma, which meets Cahan's criteria for radio-induced tumor, is very rare; the first case was published by Kleriga et al. We report a rare case observed in a 46-year-old man with a past history of right nose leiomyosarcoma treated 40 years earlier by surgery and interstitial and external beam radiation. At admission, the patient presented left hemiparesis revealing a right frontal GCG confirmed by pathology after cranial surgery. We describe this case firstly because of its rare histological variety and discuss its clinical, radiological, histopathological, therapeutic and prognostic characteristics with literature data. Secondly, because of its occurrence 40 years after external radiotherapy, which could suggest the hypothesis of radio-induced glioblastoma.

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