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Methylation status of *MGMT* gene promoter in meningiomas

Paula de Robles¹², John McIntyre²³⁴, Sanjog Kalra⁵, Gloria Roldán²⁴, Gregory Cairncross¹², Peter Forsyth²⁴, Tony Magliocco²³, Mark Hamilton¹², Jacob Easaw²⁴

Abstract

Meningiomas are usually cured by surgical resection. However, approximately 10% are characterized by more aggressive clinical behavior and higher risk of recurrence. Typically, recurrent meningiomas require further surgical resection followed, in some cases, by radiotherapy. To date, no chemotherapeutic agent has proven to be effective in either preventing or treating recurrence. The alkylating chemotherapeutic agent, Temozolomide (TMZ) has shown to increase overall survival in patients with glioblastoma (GBM) but its effectiveness for other types of brain tumor is less known. The clinical benefit of TMZ seems to be limited to those GBM tumors with promoter methylation of the *MGMT* gene. In this study, we assessed if a biologic rationale exists to support the use of TMZ as a treatment for meningiomas by assessing the *MGMT* promoter methylation status in these tumors using methylation specific PCR. We investigated the *MGMT* promoter methylation status in 36 tumors (32 newly diagnosed; 4 recurrent). Histologically, the majority were grade I. Patients were primarily female (64%) with a mean age of 52. None of the meningiomas in our series showed *MGMT* gene promoter methylation. Based on these data, we conclude that there is no biological rationale to suggest that TMZ might have significant anti-meningioma activity.

ABSTRACT

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¹ Department of Clinical Neurosciences, University of Calgary, Alberta, Canada

² Clark Smith Integrated Brain Tumor Research Centre, Calgary, Alberta, Canada

³ Department of Pathology and Laboratory Medicine, University of Calgary, Alberta, Canada

⁴ Department of Oncology, Tom Baker Cancer Centre, Alberta Cancer Board, Calgary, Alberta, Canada

⁵ Faculty of Medicine, University of Calgary, Alberta, Canada

Corresponding author: Dr. Jacob Easaw. Department of Oncology, Tom Baker Cancer Center, 1331 29 St NW, T2N 4N2, Calgary, Alberta, Canada. Phone: 1-403-521-3405 Fax: 1-403-283-1651.

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