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**Prognostic molecular markers with no impact on decision-making: the paradox of gliomas based on a prospective study**

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**This study assessed the prognostic value of several markers involved in gliomagenesis, and compared it with that of other clinical and imaging markers already used. Four-hundred and sixteen adult patients with newly diagnosed glioma were included over a 3-year period and tumour suppressor genes, oncogenes, *MGMT* and *hTERT* expressions, losses of heterozygosity, as well as relevant clinical and imaging information were recorded. This prospective study was based on all adult gliomas. Analyses were performed on patient groups selected according to World Health Organization histoprognostic criteria and on the entire cohort. The endpoint was overall survival, estimated by the Kaplan–Meier method. Univariate analysis was followed by multivariate analysis according to a Cox model. *p14<sup>ARF</sup>*, *p16<sup>INK4A</sup>* and *PTEN* expressions, and 10p 10q23, 10q26 and 13q LOH for the entire cohort, *hTERT* expression for high-grade tumours, *EGFR* for glioblastomas, 10q26 LOH for grade III tumours and anaplastic oligodendrogliomas were found to be correlated with overall survival on univariate analysis and age and grade on multivariate analysis only. This study confirms the prognostic value of several markers. However, the scattering of the values explained by tumour heterogeneity prevents their use in individual decision-making.**

**Keywords:** adult gliomas; outcome prediction; markers; RT-PCR; LOH; decision-making

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