

PubMed

U.S. National Library of Medicine
National Institutes of Health



Display Settings: Abstract

[BMC Cancer](#). 2010 Aug 13;10(1):424. [Epub ahead of print]

Impact of adjuvant chemotherapy for gliomatosis cerebri.

Kong DS, Kim ST, Lee JI, Suh YL, Lim DH, Kim WS, Kwon KH, Park K, Kim JH, Nam DH.

Abstract

ABSTRACT:

OBJECTIVE: Gliomatosis cerebri (GC) is characterized by a diffuse infiltration of tumor cells throughout CNS, however, few details are available about the chemotherapeutic effect on GC. The aim of this study was to investigate its clinical course and to determine the efficacy of chemotherapy for GC.

METHODS: Between Jan. 1999 and Dec. 2004, 37 GC patients were diagnosed by biopsy and treated with radiotherapy in a single institution. To determine the efficacy of chemotherapy for GC, we retrospectively reviewed their clinical courses. The study cohort was divided into 2 groups, those with and without receiving post-radiotherapy adjuvant chemotherapy such as temozolomide or nitrosourea-based chemotherapy.

RESULTS: Nineteen patients with adjuvant chemotherapy were assigned to the chemotreatment group and 18 with radiotherapy alone were assigned to the control group. Mean survival for chemotreatment group and control group were 24.2 and 13.1 months, respectively ($p = 0.045$). Time to progression for these groups were 16.0 and 6.0 months, respectively ($p = 0.007$). Overall review of the clinical course of patients with GC provided that early appearance of new contrast-enhancing lesions within 6 months from the initial diagnosis and higher histological grade were closely associated with poor survival ($p < 0.001$ and $p = 0.008$).

CONCLUSION: Adjuvant chemotherapy following radiotherapy could prolong the survival in patients with GC. In addition, newly developed contrast-enhanced lesions on the follow-up MR images indicate the progression of GC.

PMID: 20704759 [PubMed - as supplied by publisher]

[LinkOut - more resources](#)