Guidelines, "minimal requirements" and standard of care in glioblastoma around the Mediterranean Area: A report from the AROME (Association of Radiotherapy and Oncology of the Mediterranean arEa) Neuro-Oncology working party.

Abstract

Glioblastoma is the most common and the most lethal primary brain tumor in adults. Although studies are ongoing, the epidemiology of glioblastoma in North Africa (i.e. Morocco, Algeria and Tunisia) remains imperfectly settled and needs to be specified for a better optimization of the neuro-oncology healthcare across the Mediterranean area and in North Africa countries. Over the last years significant therapeutic advances have been accomplished improving survival and quality of life of glioblastoma patients. Indeed, concurrent temozolomide-radiotherapy (temoradiation) and adjuvant temozolomide has been established as the standard of care associated with a survival benefit and a better outcome. Therefore, considering this validated strategy and regarding the means and some other North Africa countries specificities, we decided, under the auspices of AROME (association of radiotherapy and oncology of the Mediterranean area; www.aromecancer.org), a non-profit organization, to organize a dedicated meeting to discuss the standards and elaborate a consensus on the "minimal requirements" adapted to the local resources. Thus, panels of physicians involved in daily multidisciplinary brain tumors management in the two borders of the Mediterranean area have been invited to the AROME neuro-oncology working party. We report here the consensus, established for minimal human and material resources for glioblastoma diagnosis and treatment faced to the standard of care, which should be reached. If the minimal requirements are not reached, the patients should be referred to the closest specialized medical center where at least minimal requirements, or, ideally, the standard of care should be guaranteed to the patients.

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