

Glioma patient-reported outcome assessment in clinical care

Authors' reply

We thank Constantin Tuleasca and colleagues for their correspondence related to our Policy Review.¹ We agree that there are many symptom, functional, and psychosocial effects that can be important to patients with glioma. We have proposed the quantitative, accurate, and sensitive measurement of a core set of symptoms and functional effects that are most directly related to disease and treatment symptomatology. The usefulness of having a core standardised brief assessment, particularly in a clinical trial context, cannot be overstated. Although our core set of priority constructs is only a subset of all that might be important to patients, we think these outcomes are relevant across the broadest range of contexts, and standardising these patient-reported assessments across studies, coupled with standard tumour, survival, and safety data, could allow us to truly harness the power of large datasets. With standardised datasets, we can explore the use of methods such as machine learning and other novel analytic techniques that we hope might lead to improved therapeutic development and clinical care for this vulnerable patient population.

We declare no competing interests. This publication reflects the views of the individual authors and should not be construed to represent official views or policies of the US Food and Drug Administration or the National Cancer Institute.

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- 1 Armstrong TS, Dirven L, Arons D, et al. Glioma patient-reported outcome assessment in clinical care and research: a Response Assessment in Neuro-Oncology collaborative report. *Lancet Oncol* 2020; **21**: e97–103.