

CORRECTED PROOF

Resection of glioma—Feeding the beast?

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Extract

It is well established that glioma cell infiltration extends far beyond the radiological limits of the tumor. Even more, glioma cells and brain parenchyma develop a functional multicellular network structure by using tumor microtubes formed by membrane protrusions as routes for brain invasion, proliferation and to interconnect over long distances. Therefore, these tumors should be considered a systemic brain disease rather than a delineated tumor.¹ Given this diffuse invasion pattern, an oncological “radical” resection is virtually impossible in the majority of cases. Yet, surgical excision is one central pillar in the treatment strategy.² However, there is definitional fuzziness regarding categories for extent of resection. Prior studies quantify the percentage of tumor volume reduction while more recent studies suggest the absolute residual tumor volume to be more relevant in terms of prognosis.³ Although a series of studies have reported a survival benefit when parts of the surrounding T2/FLAIR-hyperintense...

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