Analysis of long-term survivors of glioblastoma multiforme in a single institution with aggressive local retreatment protocol.

Abstract: Current treatment methods result in survival beyond 2 years in just a minority of adult patients with glioblastoma multiforme (GBM). Our institution has used an aggressive policy of local retreatment, including surgery and radiotherapy, at first relapse. Long-term survival (>2 years) after such an approach was evaluated. PATIENTS AND METHODS: A retrospective analysis was carried out of all patients with confirmed histological diagnosis of GBM at relapse. Patients with oligodendrogial component or progression from low-grade glioma were not included. RESULTS: Out of the 30 patients managed with aggressive local retreatment, 8 survived for more than 2 years, but no 5-year survivors were observed. All were younger than 60 years, had a good performance status, RPA class III or IV and a long interval to relapse. Those with the longest survival times had also received two different chemotherapy regimens. However, two of the patients were never treated with chemotherapy. Survival from retreatment was 5-17 months. CONCLUSION: When selecting patients on the basis of the factors associated with long-term survival, the same sequence of surgery, radiotherapy and chemotherapy that should be considered at first diagnosis might provide a moderate survival extension.