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Modulo per la sottomissione abstract di ricerca **CLINICA**

Titolo (massimo **15 parole**)

The impact of surgery in IDH-1 Wild Type Glioblastoma in relation with the MGMT deregulation

Autori (cognome e iniziali, es: Grassi L.)

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Testo (massimo **250 parole**, preferibilmente in italiano (accettato anche in inglese), suddiviso in Introduzione, **Metodi, Risultati, Conclusioni e Finanziamento**)

INTRODUCTION. The treatment of choice in Glioblastoma is the maximal surgical extent of resection (EOR) followed by adjuvant chemo-radiotherapy. The maximal EOR and the MGMT promoter methylation are associated with prolonged PFS and OS. Only few studies correlate the clinical outcome with the biomolecular aspects in relation with the EOR.

METHODS. A series of 116 patients operated between 2004 and 2013 with GBM and different EOR (Gross Total Resection – GTR –, Partial Resection – PR –, and Biopsy) was analysed for histology and biomolecular.

RESULTS. 71 samples showed a MGMT non methylated and 41 hyper-methylation (4 samples were undefined). Patients with GTR had an OS and a PFS significantly better compared with the other two groups ($p=0.001$ and $p=0.035$, respectively). MGMT methylation was associated with better OS in the biopsy group ($p=0.022$) and OS and PFS in PR ($p=0.02$ and $p=0.012$, respectively), but not in the GTR group ($p=0.252$ for OS, $p=0.256$ for PFS) or the PFS in the biopsy group ($p=0.259$). MGMT protein expression analysis in immunohistochemistry does not show a particular significant relation regarding OS and PFS. No association was found for microRNAs.

CONCLUSION. Our study confirms the importance of a safe maximal EOR and the positive prognostic value of the MGMT methylation only in case of the presence of tissue (PR) and just a positive but non-significant trend in its absence (GTR). Immunohistochemistry is not reliable as the MGMT methylation status and microRNA seems not to play a role for the clinical outcome in relation with the EOR.

Visto superiore* (prego indicare **Nome e Cognome** del superiore) ***campo obbligatorio**

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Criteria per sottomissione Abstract:
NO Case report
NO Abstract senza nessun risultato
VISTO da un superiore



Invio Abstract