

21st World Congress on

RADIOLOGY & CANCER RESEARCH

August 27-28, 2018 | Toronto, Canada



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The effectiveness of stereotactic radiosurgery and bevacizumab for recurrent high-grade gliomas

Objective: This study aimed to evaluate the efficacy of stereotactic radiosurgery (SRS) combined with bevacizumab (BEV) compared with stereotactic radiosurgery and temozolomide (TMZ) for recurrent high-grade gliomas (HGGs).

Methods: Patients with recurrent high-grade glioma who received SRS+BEV (n=35) or SRS+TMZ (n=23) between June 2013 and September 2017 were retrospectively analyzed. All patients were diagnosed with high-grade glioma by operation or biopsy. They received conventional radiotherapy (total about 60Gy) before this treatment. SRS was administered at a median dose of 14Gy, which was followed by BEV administration intravenously at 5mg/Kg with an interval of 1 month.

Results: The median overall survival (OS) in the SRS+BEV group was significantly longer than that in the SRS+TMZ group (11.4 vs. 6.2 months; $p=0.02$). In patients with isocitrate dehydrogenase (IDH) wild-type tumors, the SRS+BEV treatment significantly prolonged survival than the SRS+TMZ treatment (10.7 vs. 5.7 months; $p=0.01$). One-year survival and two-year survival in the SRS+BEV group were 65.7% and 28.6% respectively, significantly higher than the SRS+TMZ group (51.9% and 18.5%). No severe adverse effect was found.

Conclusion: SRS+BEV significantly prolonged survival duration than SRS+TMZ and improve the life quality in patients with recurrent high-grade glioma.

Biography

Zhiwen Zhang, MD, PhD, director of Department of Neurosurgery, First Affiliated Hospital of Chinese General Hospital. He has completed his MD and PhD in China, worked in Kyoto University as visiting professor for 4 years. He has published more than 25 papers in reputed journals and has been serving as an editorial board member of repute.

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