

Anaplastic ependymoma treatment

The standard of care for ependymoma varies by geographic location and treatment center. Despite differing opinions about potential indications and clinical scenarios of ependymoma, experts worldwide generally agree that surgery and radiation therapy (RT) are mainstays of treatment ¹⁾.

Surgery and RT form the backbone for Children's Oncology Group (COG) ^{2) 3)} and International Society for Pediatric Oncology (SIOP) ⁴⁾ trials on ependymoma.

Surgery and RT were established as the gold standard for intracranial ependymoma, as outlined in a benchmark study at St Jude Children's Research Hospital (St Jude) from 1997 to 2007 ⁵⁾.

The benefit of postoperative chemotherapy for anaplastic [ependymoma](#) remains unknown.

[Temozolomide](#) (TMZ) may be effective for pediatric refractory anaplastic ependymoma with low [MGMT](#) protein expression ⁶⁾.

The need to diagnose and differentiate the aggressive variants, which include the [Posterior fossa type A ependymoma](#) and the supratentorial [Ependymoma RELA fusion positive](#), is imperative to escalate therapy and improve survival ⁷⁾.

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