

Finnish Cancer Registry

From the nationwide Finnish [Cancer Registry](#), Raj et al. identified all adult (≥ 18 years) patients with histopathological diagnoses of [glioblastoma](#) from 2000 to 2013. Five [university hospitals](#) (treating all glioblastoma patients in Finland) were classified as [high-volume center](#) (one hospital), middle-volume (one hospital), and low-volume (three hospitals) based on their annual numbers of cases.

They also estimated one-year survival rates, estimated median overall survival times, and compared relative excess risk (RER) of death between high, middle, and low-volume hospitals.

A total of 2,045 patients were included. The mean numbers of annually treated patients were 54, 40, and 17 in the high, middle, and low-volume hospitals, respectively. One-year survival rates and median survival times were higher and longer in the high-volume (39%, 9.3 months) and medium-volume (38%, 8.9 months) hospitals than in the low-volume (32%, 7.8 months) hospitals. RER of death was higher in the low-volume hospitals than in the high-volume hospital (RER = 1.19, 95% CI 1.07-1.32, $p = 0.002$). There was no difference in RER of death between the high-volume and medium-volume hospitals ($p = 0.690$).

Higher glioblastoma case volumes were associated with improved survival. Future studies should assess whether this association is due to differences in patient-specific factors or treatment quality ¹⁾.

Despite the increased proportion of elderly glioblastoma patients, population-level survival of glioblastoma patients has improved since the year 2000. However, increasing incidence, increasing age of patients, and poor survival in elderly are alarming, and future studies should perhaps focus more on elderly ²⁾.

Unclassified

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Korja M, Raj R, Seppä K, Luostarinen T, Malila N, Seppälä M, Mäenpää H, Pitkäniemi J. Glioblastoma survival is improving despite increasing incidence rates: a nationwide study between 2000 and 2013 in Finland. *Neuro Oncol*. 2019 Feb 19;21(3):370-379. doi: 10.1093/neuonc/noy164. PubMed PMID: 30312433; PubMed Central PMCID: PMC6380416.

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