

# Glioblastoma Radiotherapy

Historically, the treatment for glioblastoma had consisted of maximal safe resection followed by an adjuvant nitrosourea, with trials by the Brain Tumor Study Group demonstrating evidence for post-op Radiotherapy over best supportive care <sup>1) 2)</sup>.

Further analysis of the relationship between survival and radiation dose revealed a dose-effect relationship, with doses of 60 Gy providing superior survival when compared to lower doses <sup>3)</sup>.

## Glioblastoma Stereotactic Radiosurgery

[Glioblastoma Stereotactic Radiosurgery](#)

## Glioblastoma Radioresistance

[Glioblastoma Radioresistance](#)

<sup>1)</sup>

Walker MD, Green SB, Byar DP, Alexander E, Jr, Batzdorf U, Brooks WH, et al. Randomized comparisons of radiotherapy and nitrosoureas for the treatment of malignant glioma after surgery. N Engl J Med (1980) 303:1323–9.10.1056/NEJM198012043032303

<sup>2)</sup>

Walker MD, Alexander E, Jr, Hunt WE, MacCarty CS, Mahaley MS, Jr, Mealey J, Jr, et al. Evaluation of BCNU and/or radiotherapy in the treatment of anaplastic gliomas. A cooperative clinical trial. J Neurosurg (1978) 49:333–43.10.3171/jns.1978.49.3.0333

<sup>3)</sup>

Walker MD, Strike TA, Sheline GE. An analysis of dose-effect relationship in the radiotherapy of malignant gliomas. Int J Radiat Oncol Biol Phys (1979) 5:1725–31.10.1016/0360-3016(79)90553-4

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