

Gliosarcoma treatment

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Good surgical excision is a favorable prognostic factor for the outcome of GSM. Gliosarcoma which resembles meningioma has got better survival outcome compared to the one that resembles glioblastoma ¹⁾

In a national analysis of [gliosarcoma](#) patients, [temozolomide](#) was associated with prolonged OS irrespective of [MGMT](#) status. These results provide support for the current practice of trimodal therapy for gliosarcoma ²⁾.

Due to its rarity, the optimal therapy of GS have been based on small retrospective cohort studies, with treatment presently utilizing regimens established for other high-grade gliomas, including combination of resection, radiotherapy and temozolomide-based chemotherapy. As more information is gathered about GS molecular profiles, novel treatment strategies may be developed to improve outcomes of GS patients ³⁾.

¹⁾

Nayak R, Akash J, Patel B, Gandham EJ, Krishnaprabhu R. Primary Gliosarcoma: A 15-Year Experience at a Tertiary Care Center. *Neurol India*. 2024 Nov 1;72(6):1213-1217. doi: 10.4103/neurol-india.Neurol-India-D-24-00804. Epub 2024 Dec 17. PMID: 39690994.

²⁾

Kavouridis VK, Ligon KL, Wen PY, Iorgulescu JB. Survival outcomes associated with MGMT promoter methylation and temozolomide in gliosarcoma patients. *J Neurooncol*. 2022 Apr 26. doi: 10.1007/s11060-022-04016-5. Epub ahead of print. PMID: 35474499.

³⁾

McAleer MF, Brown PD. Therapeutic management of gliosarcoma in the temozolomide era. *CNS Oncol*. 2015;4(3):171-8. doi: 10.2217/cns.14.61. Epub 2015 Apr 23. PMID: 25905568; PMCID: PMC6088332.

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