

High-grade glioma surgery indications

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Surgery is one of the primary treatment modalities for [high-grade gliomas](#) (HGGs). The indications for surgery in the context of high-grade glioma are typically based on various factors and considerations, including the patient's [overall health](#), tumor characteristics, and the goals of treatment. Here are some common indications for high-grade glioma surgery:

Tumor Resection: The primary goal of surgery for high-grade gliomas is to achieve maximal safe resection of the tumor. This involves removing as much of the tumor as possible without causing significant damage to critical brain structures. Maximal resection has been associated with improved outcomes in certain cases.

Diagnostic Biopsy: In cases where complete resection is not feasible due to the tumor's location or the patient's health condition, a biopsy may be performed to obtain a tissue sample for histological analysis. This helps in confirming the diagnosis and determining the specific type and grade of the glioma.

Relief of Symptoms: Surgery may be indicated to alleviate symptoms caused by the tumor, such as increased intracranial pressure, seizures, or neurological deficits. Removing or reducing the tumor mass can provide relief from these symptoms and improve the patient's quality of life.

Tumor Localization for Adjuvant Therapies: Surgical resection helps in precisely localizing the tumor, facilitating the planning and delivery of adjuvant therapies such as radiation therapy and chemotherapy. This targeted approach aims to eradicate remaining tumor cells and prevent or delay tumor recurrence.

Molecular and Genetic Characterization: Advances in molecular and genetic profiling of gliomas have led to more personalized treatment approaches. Surgery allows for the collection of tissue samples for molecular analysis, which can guide the selection of targeted therapies based on specific genetic alterations.

It's important to note that surgery is often just one component of a comprehensive treatment plan for high-grade gliomas. Following surgery, patients may undergo additional treatments, such as radiation

therapy and chemotherapy, to address residual tumor cells. The decision for surgery and the extent of resection depend on individual patient factors and the characteristics of the glioma. The multidisciplinary team, including neurosurgeons, neuro-oncologists, and radiation oncologists, collaborates to tailor the treatment approach to each patient's unique situation.

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