



WHO grade I meningiomas: classification-tree for prognostic factors of survival

Submitted by Stéphanie Pinot on Tue, 06/25/2019 - 15:35

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| Titre | WHO grade I meningiomas: classification-tree for prognostic factors of survival |
| Type de publication | Article de revue |
| Auteur | Lemée, Jean-Michel [1], Joswig, Holger [2], Da Broi, Michele [3], Corniola, Marco Vincenzo [4], Scheie, David [5], Schaller, Karl [6], Helseth, Eirik [7], Meling, Torstein R [8] |
| Editeur | Springer (part of Springer Nature) |
| Type | Article scientifique dans une revue à comité de lecture |
| Année | 2019 |
| Langue | Anglais |
| Date | 10 Juin 2019 |
| Titre de la revue | Neurosurgical Review |
| ISSN | 1437-2320 |
| Mots-clés | Meningioma [9], Overall survival [10], Prognostic factors [11], Time-to-retreat [12], WHO grade I [13] |
| Résumé en anglais | <p>World Health Organization (WHO) grade I meningiomas are intracranial extracerebral tumors, in which microsurgery as a stand-alone therapy provides high rates of disease control and low recurrence rates. Our aim was to identify prognostic factors of overall survival and time-to-retreat (OS; TTR) in a cohort of patients with surgically managed WHO grade I meningioma. Patients with WHO grade I meningiomas from a retrospectively (1990 to 2002) and prospectively managed (2003 to 2010) databank of Oslo University Hospital, Norway, were included. The mean follow-up was 9.2 ± 5.7 years, with a total of 11,414 patient-years. One thousand three hundred fifty-five patients were included. The mean age was 58 ± 13.2, mean Karnofsky Performance Status (KPS) 92.6 ± 26.1 and female-to-male ratio 2.5:1. The 1-year, 5-year, 10-year, 15-year, and 20-year probabilities were 0.98, 0.91, 0.87, 0.84, and 0.8 for TTR. Patient age (OR 0.92 [0.91, 0.94]), male sex (OR 0.59 [0.45, 0.76]), preoperative KPS ≥ 70 (OR 2.22 [1.59, 3.13]), skull base location (OR 0.77 [0.60, 1]), and the occurrence of a postoperative hematoma (OR 0.44 [0.26, 0.76]) were identified as independent prognostic factors of OS. Patient age (OR 1.02 [1.01, 1.03]) and skull base location (OR 0.30 [0.21, 0.45]) were independent predictors of decreased PFS. Using a recursive partitioning analysis, we suggest a classification tree for the prediction of 5-year PFS based on patient and tumor characteristics. The findings from this cohort of meningioma WHO I patients helps to identify patients at risk of recurrence and tailor the therapeutic management.</p> |
| URL de la notice | http://okina.univ-angers.fr/publications/ua19842 [14] |
| DOI | 10.1007/s10143-019-01117-0 [15] |
| Lien vers le document | https://link.springer.com/article/10.1007%2Fs10143-019-01117-0 [16] |
| Titre abrégé | Neurosurg Rev |

Liens

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- [17] <http://www.ncbi.nlm.nih.gov/pubmed/31183587?dopt=Abstract>

Publié sur *Okina* (<http://okina.univ-angers.fr>)