#15#

Revisiones (todas) * Reviews (all)**

GLIOMAS AND RELATED TUMORS

(Conceptos / Keywords: Gliomas; Glioblastoma multiforme; Oligodendroglioma; Astrocytoma, Ependymoma; Medulloblastoma; etc).

Agosto - Septiembre 2013 / August - September 2013

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[1]

TÍTULO / TITLE: - Combinational targeting offsets antigen escape and enhances effector functions of adoptively transferred T cells in Glioblastoma.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Mol Ther. 2013 Aug 13. doi: 10.1038/mt.2013.185.

●● Enlace al texto completo (gratuito o de pago) 1038/mt.2013.185

AUTORES / AUTHORS: - Hegde M; Corder A; Chow KK; Mukherjee M; Ashoori A; Kew Y; Zhang J; Baskin DS; Merchant FA; Brawley VS; Byrd TT; Krebs S; Wu J; Liu H; Heslop HE; Gottschalk S; Yvon E; Ahmed N

INSTITUCIÓN / INSTITUTION: - 1] Center for Cell and Gene Therapy [2] Texas Children's Cancer Center, Departments of [3] Pediatrics.

RESUMEN / SUMMARY: - Preclinical and early clinical studies have demonstrated that chimeric antigen receptor (CAR)-redirected T cells are highly promising in cancer therapy. We observed that targeting HER2 in a Glioblastoma cell line results in the emergence of HER2-null tumor cells that maintain the expression of non-targeted tumor associated antigens (TAA). Combinational targeting of these TAAs could thus offset this escape mechanism. We studied the single-cell co-expression patterns of HER2, IL-13Ralpha2 and EphA2 in primary Glioblastoma samples using multicolor flow

cytometry and immunofluorescence, and applied a binomial routine to the permutations of antigen expression and the related odds of complete tumor elimination. This mathematical model demonstrated that co-targeting HER2 and IL-13Ralpha2 could maximally expand the therapeutic reach of the T cell product in all primary tumors studied. Targeting a third antigen did not predict an added advantage in the tumor cohort studied. We thus generated bispecific T cell products from healthy donors and from GBM patients by pooling T cells individually expressing HER2 and IL-13Ralpha2-specific CARs and by making individual T cells to co-express both molecules. Both HER2/IL-13Ralpha2-bispecific T cell products offset antigen escape, producing enhanced effector activity in vitro immunoassays (against autologous glioma cells in the case of GBM patient products) and in an orthotopic xenogeneic murine model. Further, T cells co-expressing HER2- and IL-13Ralpha2-CARs exhibited accentuated yet antigen-dependent downstream signaling and a particularly enhanced antitumor activity.Molecular Therapy (2013); doi:10.1038/mt.2013.185.

TÍTULO / TITLE: - Prevalence of cerebral aneurysms in patients treated for left cardiac myxoma: A prospective study.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Clin Radiol. 2013 Nov;68(11):e624-e628. doi: 10.1016/j.crad.2013.06.010. Epub 2013 Aug 9.

●● Enlace al texto completo (gratuito o de pago) 1016/j.crad.2013.06.010

AUTORES / AUTHORS: - Vigano S; Papini GD; Cotticelli B; Valvassori L; Frigiola A; Menicanti L; Di Leo G; Sardanelli F

INSTITUCIÓN / INSTITUTION: - Scuola di Specializzazione in Radiodiagnostica, Universita degli Studi di Milano, Milano, Italy.

RESUMEN / SUMMARY: - AIM: To estimate the prevalence of cerebral aneurysms in patients previously treated for left cardiac myxoma (LCM). MATERIALS AND METHODS: This prospective institutional review board-approved study included patients treated for LCM. All patients treated at our institution (IRCCS Policlinico San Donato, Italy) were telephoned and those enrolled underwent unenhanced brain magnetic resonance imaging (MRI) using sagittal T1-weighted turbo spin-echo (TSE); axial T2-weighted TSE; axial fluid-attenuated inversion-recovery; axial echo-planar diffusion-weighted; and three-dimensional time-of-flight angiographic sequences. RESULTS: Seventy-six patients were telephoned, and data regarding their clinical history since tumor resection were obtained for 49 patients (64%). Four of the 49 (8%) patients were deceased, one due to a cerebral hemorrhage from a ruptured cerebral aneurysm 8 years after tumor resection. One patient had a pacemaker preventing MRI. Of the remaining 44 patients, 31 refused MRI and 13 were enrolled (10 females; mean age 64 years). Three of the 13 (23%; two females; 59-78 years) were diagnosed with a cerebral aneurysm, from 2 mm to 4-5 mm in diameter, involving the right middle

cerebral artery (n = 2) or the right internal carotid artery (n = 1). Including the deceased patient, the resulting prevalence was 4/14 (29%). CONCLUSION: From this preliminary study, one-third of patients treated for LCM may present with a cerebral aneurysm. Longitudinal large studies are needed to further clarify this matter.

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[2]

TÍTULO / TITLE: - Cationic core-shell nanoparticles with carmustine contained within O(6)-benzylguanine shell for glioma therapy.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Biomaterials. 2013 Nov;34(35):8968-78. doi: 10.1016/j.biomaterials.2013.07.097. Epub 2013 Aug 16.

●● Enlace al texto completo (gratuito o de pago)

1016/j.biomaterials.2013.07.097

AUTORES / AUTHORS: - Qian L; Zheng J; Wang K; Tang Y; Zhang X; Zhang H; Huang F; Pei Y; Jiang Y

INSTITUCIÓN / INSTITUTION: - Key Laboratory of Smart Drug Delivery (Fudan University), Ministry of Education, Department of Pharmaceutics, School of Pharmacy, Fudan University, Lane 826, Zhang Heng Road, Shanghai 201203, PR China.

RESUMEN / SUMMARY: - The application of carmustine (BCNU) for glioma treatment is limited due to its poor selectivity for tumor and tumor resistance caused by O(6)-methylguanine-DNA-methyl transferase (MGMT). To improve the efficacy of BCNU, we constructed chitosan surface-modified poly (lactide-co-glycolides) nanoparticles (PLGA/CS NPs) for targeting glioma, loading BCNU along with O(6)-benzylguanine (BG), which could directly deplete MGMT. With core-shell structure, PLGA/CS NPs in the diameter around 177 nm showed positive zeta potential. In vitro plasma stability of BCNU in NPs was improved compared with free BCNU. The cellular uptake of NPs increased with surface modification of CS and decreasing particle size. The cytotoxicity of BCNU against glioblastoma cells was enhanced after being encapsulated into NPs; furthermore, with the co-encapsulation of BCNU and BG into NPs, BCNU + BG PLGA/CS NPs showed the strongest inhibiting ability. Compared to free drugs, PLGA/CS NPs could prolong circulation time and enhance accumulation in tumor and brain. Among all treatment groups, F98 glioma-bearing rats treated with BCNU + BG PLGA/CS NPs showed the longest survival time and the smallest tumor size. The studies suggested that the co-encapsulation of BCNU and BG into PLGA/CS NPs could remarkably enhance the efficacy of BCNU, accompanied with greater convenience for therapy.

TÍTULO / TITLE: - Breast metastases from oligodendroglioma: An unusual extraneural spread in two young women and a review of the literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Crit Rev Oncol Hematol. 2013 Aug 13. pii: S1040-8428(13)00161-3. doi: 10.1016/j.critrevonc.2013.07.010.

●● Enlace al texto completo (gratuito o de pago) 1016/j.critrevonc.2013.07.010

AUTORES / AUTHORS: - Mazza E; Belli C; Terreni M; Doglioni C; Losio C; Cantore M; Mambrini A; Reni M

INSTITUCIÓN / INSTITUTION: - Department of Medical Oncology, San Raffaele Scientific Institute, via Olgettina 60, 20132 Milan, Italy.

RESUMEN / SUMMARY: - BACKGROUND: Extraneural dissemination of oligodendroglioma is rare. Cases of breast metastases have never been described in the literature. CASE REPORTS: We report the first two cases of young women with initial diagnosis of anaplastic oligodendroglioma who experienced mammary gland metastases and a review of the literature. RESULTS: Immunohistochemical analysis performed on material from both primary and metastatic sites did not allow to draw any conclusion on possible etiopathogenetic hypothesis. A review of literature yielded 35 cases of extracranial metastatic oligodendroglioma from 1989 to 2012. CONCLUSION: Though rare, extracranial dissemination from oligodendroglioma may occur not only in long surviving heavily pre-treated patients. The review of literature and these two cases suggest that spread is primarily to bone and then from bone to other organs through hematogenous route mostly due to leptomeningeal or dura mater invasion. Chemotherapy regimens similar to those commonly used for non metastatic oligodendroglioma are recommended for patients with good performance status.

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[3]

TÍTULO / TITLE: - IDH1 mutation is associated with improved overall survival in patients with glioblastoma: a meta-analysis.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Tumour Biol. 2013 Aug 1.

AUTORES / AUTHORS: - Cheng HB; Yue W; Xie C; Zhang RY; Hu SS; Wang Z

INSTITUCIÓN / INSTITUTION: - Department of Neurosurgery, The Fourth Affiliated Hospital of Harbin Medical University, Harbin, 150001, China.

RESUMEN / SUMMARY: - Previous studies proposed that isocitrate dehydrogenase 1 (IDH1) mutation was associated with improved survival in patients with glioblastoma, but those studies reported varying estimates and yielded inconclusive results. The purpose of the present study was to determine the effect of IDH1 mutation on the prognosis of patients with glioblastoma by performing a meta-analysis. Pubmed and Embase databases were searched for eligible studies. Studies reporting overall survival by IDH1 mutation in patients with glioblastoma were considered potentially eligible for the meta-analysis. For the quantitative aggregation of the survival results, the IDH mutation effect was measured by the pooled hazard ratio (HR) with its 95 % confidence interval (95%CI). Nine studies with a total of 1,669 patients with

glioblastoma were finally included into this meta-analysis. Overall, the IDH1 mutation was associated with improved survival in patients with glioblastoma (random effects model HR = 0.45, 95%CI 0.29-0.69, P < 0.001). Sensitivity analysis further showed that the pooled estimates were stable in this meta-analysis. Therefore, the findings from this meta-analysis suggest that IDH1 mutation is associated with improved overall survival in patients with glioblastoma.

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[4]

TÍTULO / TITLE: - Association between GSTP1 Ile105Val polymorphism and glioma risk: A systematic review and meta-analysis.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Tumour Biol. 2013 Aug 23.

●● Enlace al texto completo (gratuito o de pago) 1007/s13277-013-1069-4

AUTORES / AUTHORS: - Xie P; Liang Y; Liang G; Liu B

INSTITUCIÓN / INSTITUTION: - Department of Neurosurgery, General Hospital of Shenyang Military Area Command, Shenyang, 110840, China.

RESUMEN / SUMMARY: - Glutathione S-transferase P1 (GSTP1) gene Ile105Val polymorphism has been suggested to be involved in the development of glioma. However, the results from the studies regarding the association between GSTP1 Ile105Val polymorphism and glioma risk have been inconsistent. Thus, we performed a meta-analysis to investigate this association. Pooled odds ratios (ORs) with 95 % confidence intervals (95 %CIs) were calculated using random or fixed effects model. Nine studies with 2,078 cases and 3,970 controls were finally included into this meta-analysis. The results suggested there was no association between GSTP1 Ile105Val polymorphism and glioma risk under recessive model (OR = 1.138, 95 %CI = 0.966-1.341, P heterogeneity = 0.088, P = 0.123). Subgroup analyses by ethnicity showed there was also no association between GSTP1 Ile105Val polymorphism and glioma risk in mixed populations under recessive model (OR = 1.199, 95 %CI = 0.928-1.549, P heterogeneity = 0.060, P = 0.166) and Caucasian populations(OR = 1.097, 95 %CI = 0.885-1.360, P heterogeneity = 0.186, P = 0.398). In conclusion, the meta-analysis suggests that there is no association between GSTP1 Ile105Val polymorphism and glioma risk. However, more well-designed and larger studies are needed to further assess this association.

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[5]

TÍTULO / TITLE: - Association between the Thr241Met polymorphism of X-ray repair cross-complementing group 3 gene and glioma risk: evidence from a meta-analysis based on 4,136 cases and 5,233 controls.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Tumour Biol. 2013 Aug 7.

●● Enlace al texto completo (gratuito o de pago) 1007/s13277-013-1059-6

AUTORES / AUTHORS: - Lin J; Kou Y

INSTITUCIÓN / INSTITUTION: - Department of Neurosurgery, General Hospital of Shenyang Military Region, 83 Wenhua Road, Shenyang, 110840, China.

RESUMEN / SUMMARY: - Genetic polymorphism of X-ray repair cross-complementing group 3 (XRCC3) Thr241Met has been implicated to alter the risk of glioma, but the results are controversial. Medline, PubMed, Embase, and Cochrane Library databases were independently searched by two investigators up to 13 July 2013. Summary odds ratios (OR) and 95 % confidence interval (CI) for Thr241Met polymorphism and prostate cancer were calculated. Statistical analysis was performed with the software program Stata 12.0. A total of 10 independent studies, including 4,136 cases and 5,233 controls, were identified. Our analysis suggested that Thr241Met was not associated with glioma risk in overall population. In the subgroup analysis, we detected no significant association between Thr241Met polymorphism and glioma risk in different descent populations. Subgroup analysis was held by source of controls, significant association was found between this polymorphism and glioma risk for population-based studies (homozygote model: OR = 1.747, 95 % CI = 1.123-2.717, P h = 0.059, I 2 = 59.7 %; recessive model, OR = 1.455, 95 % CI = 1.179-1.795, P h = 0.111, I 2 = 50.1 %; allele model, OR = 1.258, 95 % CI = 1.010-1.566, P h = 0.011, I 2 = 72.9 %). This meta-analysis showed the evidence that XRCC3 Thr241Met polymorphism was associated with a low risk of glioma development.

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[6]

TÍTULO / TITLE: - Bevacizumab for radiation necrosis following treatment of high grade glioma: a systematic review of the literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - J Neurooncol. 2013 Sep 5.

●● Enlace al texto completo (gratuito o de pago) 1007/s11060-013-1233-0

AUTORES / AUTHORS: - Lubelski D; Abdullah KG; Weil RJ; Marko NF

INSTITUCIÓN / INSTITUTION: - Cleveland Clinic Lerner College of Medicine, 9500 Euclid Ave NA21, Cleveland, OH, 44195, USA.

RESUMEN / SUMMARY: - This review identifies the current literature on the use of bevacizumab for cerebral radiation necrosis in patients with high-grade gliomas, summarizes the clinical course and complications following bevacizumab, and discusses the relative costs and benefits of this therapeutic option. A Medline search was conducted of all clinical studies before September 2012 investigating outcomes following use of bevacizumab therapy for radiation necrosis in patients with high-grade gliomas. Clinical and radiographic outcomes are reviewed. Seven studies reported a total of 30 patients with high-grade gliomas treated with bevacizumab for

radiation necrosis. All patients demonstrated decreased radiographic volume of edema on T1 and T2 MRI sequences. Clinical outcomes were reported for 23 patients: 16 (70 %) had improvement in neurologic signs or symptoms, 5 (22 %) had mixed results, and 2 (9 %) remained neurologically unchanged. Complications were documented in 5 of 7 studies (18 of 29 patients, 62 %) and included deep vein thrombosis, pulmonary embolism, visual field worsening, worsening hemiplegia, pneumonia, seizure, and fatigue. Only one study evaluated quality of life measures and none evaluated cost or cost effectiveness. Data regarding the use of bevacizumab to treat radiation necrosis in patients with high-grade gliomas is limited and primarily class III evidence. While bevacizumab improves neurological symptoms and reduces radiographic volume of necrosis-associated cerebral edema, it comes at the expense of a high rate of potentially serious complications. Definitive evidence for the utility, cost-effectiveness, and overall efficacy of this management strategy is currently lacking and additional investigation is warranted.

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[7]

TÍTULO / TITLE: - Association between XRCC3 Thr241Met polymorphism and risk of brain tumors: a meta-analysis.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Tumour Biol. 2013 Sep 6.

●● Enlace al texto completo (gratuito o de pago) 1007/s13277-013-1144-x

AUTORES / AUTHORS: - Liu J; Zhou Z; Lai T; Yin J

INSTITUCIÓN / INSTITUTION: - Department of Neurosurgery, Xinqiao Hospital, The Third Military Medical University, Chongqing, 400037, China, liujuncq19@163.com.

RESUMEN / SUMMARY: - X-ray repair cross-complementing group 3 (XRCC3) plays an important role in the process of homologous recombination repair for DNA double-strand breaks which further maintains the stability of the genome. XRCC3 Thr241Met polymorphism has been indicated in the development of cancers, but the association of the XRCC3 Thr241Met polymorphism with risk of brain tumors is still unclear owing to the conflicting findings from previous studies. We performed a meta-analysis to provide a better understanding on the association between the XRCC3 Thr241Met polymorphism and risk of brain tumors. The pooled odds ratio (OR) with corresponding 95 % confidence interval (95 % CI) was used to assess the association. Thirteen case-control studies involving a total of 4,984 cases and 7,472 controls were included. Overall, there was no statistically significant association between the XRCC3 Thr241Met polymorphism and risk of brain tumors under all contrast models. Subgroup analysis by race suggested that the XRCC3 Thr241Met polymorphism was associated with increased risk of brain tumors in Asians under all four contrast models (Met vs. Thr: OR = 1.22, 95 % CI 1.09-1.36, P < 0.01; MetMet vs. ThrThr: OR = 1.89, 95 % CI 1.38-2.57, P < 0.01; MetMet vs. ThrThr/ThrMet: OR = 1.78, 95 % CI 1.31-2.40, P <

0.01; and MetMet vs. ThrThr/ThrMet: OR = 1.19, 95 % CI 1.04-1.36, P = 0.01). However, there was no significant association between the XRCC3 Thr241Met polymorphism and risk of brain tumors in Caucasians. Therefore, the XRCC3 Thr241Met polymorphism is associated with increased risk of brain tumors, especially in Asians.

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[8]

TÍTULO / TITLE: - Neurocognitive deficits following primary brain tumor treatment: systematic review of a decade of comparative studies.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - J Neurooncol. 2013 Aug 23.

●● Enlace al texto completo (gratuito o de pago) 1007/s11060-013-1215-2

AUTORES / AUTHORS: - Gehrke AK; Baisley MC; Sonck AL; Wronski SL; Feuerstein M

INSTITUCIÓN / INSTITUTION: - Department of Medical and Clinical Psychology, Uniformed Services University of the Health Sciences, 4301 Jones Bridge Road, Bethesda, MD, 20814, USA.

RESUMEN / SUMMARY: - There has been an increase in the prevalence of adults diagnosed with and treated for primary brain tumors. Cognitive deficits are a common long-term effect in brain tumor survivors. The objective of this paper is to examine whether these deficits are specific to those diagnosed with and treated for a primary brain tumor. A systematic review of the medical literature from 2002 to 2012 was conducted to investigate neurocognitive deficits in brain tumor survivors (post-primary treatment) compared to healthy controls. Four studies were identified that met all inclusion criteria. Gliomas were the most common form of tumor included. Neuropsychological evaluation identified cognitive deficits in brain tumor survivors on tests of working memory, cognitive control and flexibility, cognitive processing speed, visual searching, planning and foresight, and general attention. While age, education, and gender can influence cognitive function, the present review indicates that deficits exist beyond those accounted for by these factors. Many primary brain tumor survivors are involved in roles (e.g., employee, parent, spouse/partner, student) that require optimal performance of these cognitive skills. Future research should evaluate brain tumor survivors on functional challenges resulting from these cognitive sequelae and develop effective ways to mitigate them.

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[9]

TÍTULO / TITLE: - Neuroendoscopic options in the treatment of mesencephalic expanding cysts: Report of four cases and review of the literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Clin Neurol Neurosurg. 2013 Sep 1. pii: S0303-8467(13)00328-4. doi: 10.1016/j.clineuro.2013.08.025.

●● Enlace al texto completo (gratuito o de pago) 1016/j.clineuro.2013.08.025

AUTORES / AUTHORS: - Fiorindi A; Delitala A; Francaviglia N; Longatti P

INSTITUCIÓN / INSTITUTION: - Department of Neurosurgery, Treviso Regional Hospital - Padova University, Italy. Electronic address: afiorindi@ulss.tv.it.

RESUMEN / SUMMARY: - OBJECTIVE: Mesencephalic expanding cysts, also called lacunae, are rare intraparenchymal, multilobulated cavities of variable diameter mostly localized in the thalamo-mesencephalic region. In symptomatic cases, usually presenting with hydrocephalus or midbrain syndrome, surgical treatment is required and, considering their position, a minimally invasive approach should be preferred. METHODS: Four cases of expanding mesencephalic cysts endoscopically treated in three different Italian centers are described. Other possible causes of intracerebral cyst were excluded in all cases by complete neuroimaging and laboratory screening. All patients presented with signs and symptoms of midbrain compression and a slight to moderate ventricular dilation was present in three cases. RESULTS: All patients underwent endoscopic cyst fenestration into the ventricle, associated with endoscopic third-ventriculostomy (ETV) in two cases and with cyst wall biopsy in one case. One patient suffered from transient worsening of her hemiparesis due to intraoperative bleeding. All patients showed clinical improvement and a reduction in cyst size on follow-up magnetic resonance images (MRI). CONCLUSION: Neuroendoscopy appears to be an effective, probably definitive surgical option in the treatment of symptomatic mesencephalic expanding cysts. Associating ETV with cyst fenestration seems to offer more complete treatment. Deep intracystic navigation and cyst wall biopsy should be avoided.

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[10]

TÍTULO / TITLE: - Clinical manifestation and neurosurgical intervention of encephalocraniocutaneous lipomatosis-a case report and review of the literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Childs Nerv Syst. 2013 Aug 24.

●● Enlace al texto completo (gratuito o de pago) 1007/s00381-013-2252-z

AUTORES / AUTHORS: - Chiang CC; Lin SC; Wu HM; Wang JC; Yang TF; Chen HH; Ho DM; Wong TT

INSTITUCIÓN / INSTITUTION: - Division of Pediatric Neurosurgery, Neurological Institute, Taipei Veterans General Hospital, Taipei, Taiwan, Republic of China.

RESUMEN / SUMMARY: - INTRODUCTION: Currently, there are only a few reported cases of symptomatic or asymptomatic subpial (intramedullary) spinal lipoma, and therefore no guidelines are available to indicate surgery. These lesions are infrequently associated with spina bifida. CASE REPORT: Herein, we provide our experience in the

neurosurgical intervention of compressive myeloradiculopathy for encephalocraniocutaneous lipomatosis (ECCL). The patient initially presented with bilateral upper hand paralysis, then regained muscle power after surgery and during 1 year of follow-up. We discuss the neurosurgical indications and intervention, imaging studies, other associated symptoms, and the pathogenesis of ECCL in an infant.

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[11]

TÍTULO / TITLE: - Atypical teratoid/rhabdoid tumor with ganglioglioma-like differentiation: Case report and review of the literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Hum Pathol. 2013 Sep 10. pii: S0046-8177(13)00331-6. doi: 10.1016/j.humpath.2013.07.039.

●● Enlace al texto completo (gratuito o de pago) 1016/j.humpath.2013.07.039

AUTORES / AUTHORS: - Krishnan C; Vogel H; Perry A

INSTITUCIÓN / INSTITUTION: - Department of Pathology, Dell Children's Medical Center, Austin, TX 78723, USA. Electronic address: chandra.krishnan@yahoo.com.

RESUMEN / SUMMARY: - Atypical teratoid/rhabdoid tumor (AT/RT) is a highly aggressive embryonal tumor of the central nervous system, which typically affects young children. A characteristic feature of AT/RT is a polyphenotypic immunoprofile and ultrastructural diversity. The morphologic and antigenic heterogeneity of AT/RTs give it the potential to mimic other embryonal central nervous system tumors, epithelial neoplasms or mesenchymal tumors. Alternatively, "collision-type" tumors have been published, in which AT/RT coexists with a separate low-grade central nervous system tumor. Here, we report a case of AT/RT with morphologic and immunohistochemical evidence of extensive ganglioglioma-like differentiation with only a small focal primitive component and minimal rhabdoid cytology. Fluorescence in-situ hybridization and immunohistochemistry demonstrated INI1/BAF47 gene/protein losses in both histologic components. To the best of our knowledge, this is the first reported case of AT/RT with extensive ganglioglioma-like differentiation. This unique case supports the notion that routine application of INI1 stains/in-situ hybridization can capture AT/RT with unexpected patterns of differentiation.

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[12]

TÍTULO / TITLE: - Pregnancy in women with gliomas: a case-series and review of the literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - J Neurooncol. 2013 Aug 25.

●● Enlace al texto completo (gratuito o de pago) 1007/s11060-013-1229-9

AUTORES / AUTHORS: - Zwinkels H; Dorr J; Kloet F; Taphoorn MJ; Vecht CJ

INSTITUCIÓN / INSTITUTION: - Department of Neurology, Medical Center Haaglanden, Lijnbaan 32, 2512 VK, The Hague, The Netherlands, h.zwinkels@mchaaglanden.nl.
RESUMEN / SUMMARY: - The occurrence of pregnancy in women with brain tumors confronts both patients and physicians with difficult decision making at each stage of pregnancy. We studied the course of events of nine pregnancies in seven women with low-grade glioma in our hospital over a 10 year period. Five patients had a surgical resection, one a biopsy and one woman was followed by wait-and-see policy before pregnancy. In two women, a therapeutic abortion was carried out in the first trimester because of signs of progression, necessitating surgical removal of the tumor. In the other five women pregnancy had an uncomplicated course. Based on a literature review, we found 28 women diagnosed with a known glioma before becoming pregnant. All pregnancies but one, were uneventful and all women had a normal delivery, including the seven cases with exposure to chemotherapy and in whom healthy babies were born. A total of 75 pregnant women were identified in whom new onset glioma developed, which was high-grade in 56 %, and becoming symptomatic in 51 % during the third trimester, usually by focal neurological deficits. We conclude that in relation to pregnancy, low-grade gliomas are more often seen in women already known with a brain tumor, while high-grade gliomas represent more frequently a new onset phenomenon. Based on these observations, guidelines are given on initiation of antitumor therapy during pregnancy, seizure management, counseling on therapeutic abortion, and on the timing and choice of obstetrical interventions.

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[13]

TÍTULO / TITLE: - Bilateral internuclear ophthalmoplegia associated with pediatric brain tumor progression: a case series and review of the literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - J Neurooncol. 2013 Sep 19.

●● Enlace al texto completo (gratuito o de pago) 1007/s11060-013-1250-z

AUTORES / AUTHORS: - Rismanchi N; Crawford JR

INSTITUCIÓN / INSTITUTION: - Division of Child Neurology, Department of Neurosciences, University of California San Diego, Rady Children's Hospital, 8010 Frost Street Suite 400, San Diego, CA, 92123, USA, nrismanchi@ucsd.edu.

RESUMEN / SUMMARY: - Internuclear ophthalmoplegia (INO) is a rare disorder of conjugate lateral gaze that has been described in a number of neurologic conditions including multiple sclerosis, stroke and less commonly brain tumors. We describe a series of 3 boys (11, 12, 15 years) diagnosed with primary central nervous system tumors (pilomyxoid variant astrocytoma, anaplastic oligoastrocytoma, gliomatosis cerebri) who developed bilateral INO as a manifestation of progressive disease. Time from diagnosis to development of bilateral INO ranged from 13-36 months. All children died of their disease 1-9 months following diagnosis of bilateral INO and had significant

dorsal pontine invasion on magnetic resonance imaging at progression. Only one child had brainstem involvement at diagnosis. Our case series highlights this rare ophthalmologic syndrome of bilateral INO in association with tumor progression and provides a literature review of brain tumor associations with INO.

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[14]

TÍTULO / TITLE: - Imaging features of medulloepithelioma: report of four cases and review of the literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Pediatr Radiol. 2013 Oct;43(10):1344-56. doi: 10.1007/s00247-013-2718-x. Epub 2013 Aug 30.

●● Enlace al texto completo (gratuito o de pago) 1007/s00247-013-2718-x

AUTORES / AUTHORS: - Sansgiri RK; Wilson M; McCarville MB; Helton KJ

INSTITUCIÓN / INSTITUTION: - Department of Radiological Sciences, St. Jude Children's Research Hospital, 262 Danny Thomas Place, MS 220, Memphis, TN, 38105-3678, USA.

RESUMEN / SUMMARY: - BACKGROUND: Intraocular medulloepithelioma is a childhood tumor arising from the nonpigmented primitive ciliary neuroepithelium. Although rarer than retinoblastoma, it remains the second most common primary intraocular neoplasm in children. The rarity of intraocular medulloepithelioma creates the challenge in establishing a clinical diagnosis, and radiologically the tumor is often confused with other intraocular masses. OBJECTIVE: To describe the clinical, imaging and pathological features of intraocular medulloepithelioma with emphasis on the role of imaging to enable its differentiation from more common intraocular pathology. MATERIALS AND METHODS: We retrospectively analyzed the clinical, histopathological and imaging data of four children with intraocular medulloepithelioma. RESULTS: All four children had medulloepithelioma arising from the ciliary body. The children were imaged with US (n = 3), MRI (n = 4), whole-body (99m)Tc-MDP scintigraphy (n = 2) and CT (n = 1). All four children had enucleation of the involved eye. One tumor was a malignant teratoid variant, two tumors were malignant nonteratoid variants and one was a nonteratoid variant of uncertain malignant potential. None of the tumors had extraocular extension on histopathology or imaging. Two children had associated retinal detachment on US and MRI examinations. All tumors were iso/hyperintense to vitreous on T1-weighted and hypointense on T2-weighted MRI and showed marked contrast enhancement of the solid components. No calcifications were identified on US or CT examinations. CONCLUSION: Our findings are consistent with previously reported cases of medulloepithelioma. This series emphasizes the roles of various imaging modalities, with pathological correlation, in differentiating the tumor from other ciliary body masses, in detecting tumor extension and in identifying associated ocular complications. In this series we also describe the results of postsurgical follow-up for tumor recurrence.

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[15]

TÍTULO / TITLE: - Childhood giant pituicytoma: A report and review of the literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Clin Neurol Neurosurg. 2013 Oct;115(10):1943-50. doi: 10.1016/j.clineuro.2013.07.032. Epub 2013 Aug 6.

●● Enlace al texto completo (gratuito o de pago) 1016/j.clineuro.2013.07.032

AUTORES / AUTHORS: - Tian Y; Yue S; Jia G; Zhang Y

INSTITUCIÓN / INSTITUTION: - Department of Neurosurgery, Beijing Tiantan Hospital, Capital Medical University, Beijing 100050, PR China.

RESUMEN / SUMMARY: - OBJECTIVE: Pituicytoma is a rare, benign, primary tumour, almost all of which occur in adults. Here, we present one case of giant pituicytoma in a boy and a review literature to assist in understanding its natural history, behaviour, clinicopathological features and treatment options. METHODS: A PUBMED search using the keywords “pituicytoma” was performed, and the citations were reviewed. RESULTS: We found 65 cases of pituicytomas, including our report, in the international literature to date; among these cases, only three were diagnosed in patients under 14 years old. CONCLUSION: Pituicytoma is a slow-growing, rare, low-grade glial neoplasm that originates in the neurohypophysis. Currently, the optimal treatment is gross total resection, and confirmed diagnosis relies upon pathological tests. Regular MRI follow-up is recommended.

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[16]

TÍTULO / TITLE: - Surgical management of parapharyngeal ganglioneuroma: case report and review of the literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - ORL J Otorhinolaryngol Relat Spec. 2013;75(4):240-4. doi: 10.1159/000353550. Epub 2013 Jul 26.

●● Enlace al texto completo (gratuito o de pago) 1159/000353550

AUTORES / AUTHORS: - Albuquerque BS; Farias TP; Dias FL

INSTITUCIÓN / INSTITUTION: - Department of Head and Neck Surgery, Brazilian National Cancer Institute, Rio de Janeiro, Brazil.

RESUMEN / SUMMARY: - Parapharyngeal ganglioneuroma is a rare benign tumor, with fewer than 40 cases having been reported in the literature. We report a case of parapharyngeal ganglioneuroma in a child, including the presentation, diagnostic testing, treatment, outcome and a review of the literature. The patient presented with a large cervical mass arising from the cervical sympathetic chain. Complete excision of the ganglioneuroma was possible via a transcervical dissection approach without

mandibulotomy. Clinical follow-up was conducted, and no recurrence has been observed to date. © 2013 S. Karger AG, Basel.

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[17]

TÍTULO / TITLE: - Lipomas of the cerebellopontine angle: Neuroradiological and surgical considerations. Review of the literature and report of our experience.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Clin Neurol Neurosurg. 2013 Oct;115(10):2280-3. doi: 10.1016/j.clineuro.2013.07.029. Epub 2013 Aug 2.

●● Enlace al texto completo (gratuito o de pago) 1016/j.clineuro.2013.07.029

AUTORES / AUTHORS: - Scuotto A; Cappabianca S; D'Errico C; Cirillo S; Natale M; D'Avanzo R; Rotondo M

INSTITUCIÓN / INSTITUTION: - Neuroradiology, Second University of Naples, Naples, Italy. Electronic address: assunta.scuotto@unina2.it.

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[18]

TÍTULO / TITLE: - Gamma knife surgery for patients with volumetric classification of nonfunctioning pituitary adenomas: a systematic review and meta-analysis.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Eur J Endocrinol. 2013 Sep 14;169(4):487-95. doi: 10.1530/EJE-13-0400. Print 2013 Oct.

●● Enlace al texto completo (gratuito o de pago) 1530/EJE-13-0400

AUTORES / AUTHORS: - Chen Y; Li ZF; Zhang FX; Li JX; Cai L; Zhuge QC; Wu ZB

INSTITUCIÓN / INSTITUTION: - Department of Neurosurgery, Yueyang Second People's Hospital, Yueyang 414000, China.

RESUMEN / SUMMARY: - OBJECTIVE: The aim of this study was to scrutinize the literature to determine the efficacy and safety of gamma knife surgery (GKS) for the treatment of nonfunctioning pituitary adenomas (NFPAs) with volumetric classification. METHODS: Electronic databases including MedLine, PubMed, and Cochrane Central were searched. The literature related to patients with NFPAs treated with GKS was collected. Eligible studies reported on the rate of tumor control (RTC), the rate of radiosurgery-induced optic neuropathy injury (RRIONI), the rate of radiosurgery-induced endocrinological deficits (RRIED), and other parameters. RESULTS: A TOTAL OF 17 STUDIES MET THE CRITERIA. BASED ON THE TUMOR VOLUME, NFPAS WERE DIVIDED INTO THREE GROUPS: the RTC of group I (93 patients) with tumor volumes <2 ml was 99% (95% CI 96-100%), the RRIONI was 1% (95% CI 0-4%), and the RRIED was 1% (95% CI 0-4%). The RTC of group II (301 patients) with volumes from 2 to 4 ml was 96% (95% CI 92-99%), the RRIONI was 0 (95% CI 0-2%), and RRIED was 7% (95% CI 2-14%). The RTC of group III (531 patients) with volumes larger than 4 ml was 91% (95%

CI 89-94%), the RRIONI was 2% (95% CI 0-5%), and the RRIED was 22% (95% CI 14-31%). There were significant differences in the RTC and in the RRIED among the three groups (P<0.001), indicating that there were higher RRIED and lower RTC with the increase of tumor volume. CONCLUSIONS: NFPAs, according to tumor volume classification, need stratification for GKS treatment. GKS is the optimal choice for the treatment of group II NFPAs. Patients with residual tumor volumes of <4 ml will benefit most from GKS treatment.

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[19]

TÍTULO / TITLE: - Potential roles of hyperbaric oxygenation in the treatments of brain tumors.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Undersea Hyperb Med. 2013 Jul-Aug;40(4):351-62.

AUTORES / AUTHORS: - Kohshi K; Beppu T; Tanaka K; Ogawa K; Inoue O; Kukita I; Clarke RE

INSTITUCIÓN / INSTITUTION: - Division of Hyperbaric Medicine and Emergency Medicine, University Hospital of the Ryukyus, Okinawa, Japan. kohshi@med.u-ryukyu.ac.jp

RESUMEN / SUMMARY: - Over the past 50 years hyperbaric oxygen (HBO2) therapy has been used in a wide variety of medical conditions, and one of them is cancer. Many clinical studies have been conducted to evaluate potential therapeutic effects of HBO2 as a part of cancer treatment. This review briefly summaries the potential role of HBO2 therapy in the treatment of malignant tumors and radiation injury of the brain. HBO2 therapy is used for the enhancement of radiosensitivity in the treatment of some cancers, including malignant brain tumors. Radiotherapy within 15 minutes following HBO2 exposure, a relatively new treatment regimen, has been studied at several institutes and has demonstrated promising clinical results for malignant gliomas of the brain. HBO2 therapy also increases sensitivity to some antineoplastic agents; non-randomized clinical trials using carboplatin-based chemotherapy combined with HBO2 show a significant advantage in survival for recurrent malignant gliomas. The possibilities of combining HBO2 therapy with radiotherapy and/or chemotherapy to overcome newly diagnosed and recurrent malignant gliomas deserve extensive clinical trials. HBO2 therapy also shows promising potential for the treatment and/or prevention of radiation injury of the brain after stereotactic radiosurgery for brain lesions. The possibilities with HBO2 to enhance the therapeutic effect of irradiation per se, and to even increase the radiation dose if there are ways to combat the side effects, should boost new scientific interest into the whole field of oncology looking for new armamentaria to fight cancer.

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[20]

TÍTULO / TITLE: - Post-traumatic malignant glioma in a pregnant woman: case report and review of the literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Neurol Med Chir (Tokyo). 2013;53(9):630-4.

AUTORES / AUTHORS: - Han Z; DU Y; Qi H; Yin W

INSTITUCIÓN / INSTITUTION: - Department of Neurosurgery, Peking University Shenzhen Hospital.

RESUMEN / SUMMARY: - To add a further contribution to the literature supporting the relationship between previous head trauma and the development of glioma. We present the first case of pregnancy-related post-traumatic malignant glioma in a 29-year-old female who was admitted because of left sided hemiplegia and epilepsy due to a malignant glial tumor. She had been operated for a right frontal hematoma caused by a motorbike accident 9 years before. Neuroimaging showed a large neoplasia in the right frontal region beneath the material used for cranialplasty, and postoperative pathological revealed a glioblastoma multiforme (GBM) in continuity with the scar resulting from the trauma. While epidemiologic studies may not be conclusive, a pathologic basis has been suggested which show that trauma act as a cocarcinogen in the presence of an initiating carcinogen. Our case fulfilled the widely established criteria for brain tumors of traumatic origin. We believe that in specific cases it is reasonable to acknowledge an etiological association between head trauma and glioma. And additional factors such as pregnancy may promote the manifestation of the clinical symptoms.

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[21]

TÍTULO / TITLE: - Surgical management of pituicytomas: case series and comprehensive literature review.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Pituitary. 2013 Sep 14.

●● Enlace al texto completo (gratuito o de pago) 1007/s11102-013-0515-z

AUTORES / AUTHORS: - Feng M; Carmichael JD; Bonert V; Bannykh S; Mamelak AN

INSTITUCIÓN / INSTITUTION: - Department of Neurosurgery, Peking Union Medical College Hospital, Beijing, China.

RESUMEN / SUMMARY: - OBJECTIVE: Pituicytomas are rare neoplasms that typically present as solid, noninfiltrative tumors occupying the sella and/or suprasellar space for which there is no consensus on optimal surgical management. We aimed to define a preferred surgical strategy for these tumors based on our clinical experience and comprehensive review of the world literature. DESIGN: Case series and review of the literature. METHODS: We documented the clinical, radiographic, and surgical findings of three patients with pituicytoma treated at our institution, as well as complications and long-term outcomes. A comprehensive review of the medical literature identified

all cases of pituicytoma for which data regarding surgical approach, outcome and complications could be extracted. We compared our results with published data. RESULTS: All three cases at our institution achieved gross total removal. Two patients underwent an expanded endoscopic endonasal transsphenoidal and transplanum (EETS-TP) approach, while one tumor was removed via craniotomy. Post-operatively all patients developed pan-hypopitutarism. The patient undergoing craniotomy suffered profound visual loss but no other neurological complications were noted. A literature review identified 67 reported cases of pituicytoma. Surgical data was available in 60 cases. Surgical approach was documented in 57 patients. Sixty-three surgeries were performed in which approach and extent of resection was available. Gross total removal was obtained in 33 % of craniotomies, 42 % of transsphenoidal procedures, and 100 % of expanded transsphenoidal procedures. Neurological complications including visual loss, hemiparesis and cranial nerve palsies were reported after craniotomy, but not after transsphenoidal approaches. Overall EETS-TP approaches were associated with the highest rate of gross total removal and no visual or neurological complications. CONCLUSIONS: EETS-TP surgery is the preferred strategy for surgical removal of pituicytoma. EETS-TP and transsphenoidal approaches are associated with higher rates of gross total removal and lower rates of neurological complications than craniotomy. Gross total removal should be the intended goal of surgery.

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[22]

TÍTULO / TITLE: - Multiple primary intramedullary ependymomas: a case report and review of the literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Spine J. 2013 Aug 27. pii: S1529-9430(13)00712-2. doi: 10.1016/j.spinee.2013.06.037.

●● Enlace al texto completo (gratuito o de pago) 1016/j.spinee.2013.06.037

AUTORES / AUTHORS: - Bydon M; Mathios D; Aguayo-Alvarez JJ; Ho C; Gokaslan ZL; Bydon A

INSTITUCIÓN / INSTITUTION: - Department of Neurosurgery, Johns Hopkins Hospital, Johns Hopkins University School of Medicine, Meyer Building, 600 N. Wolfe St, Baltimore, MD 21205, USA; Spinal Biomechanics and Surgical Outcomes Laboratory, Johns Hopkins Hospital, Johns Hopkins University School of Medicine, Meyer Building, 600 N. Wolfe St, Baltimore, MD 21205, USA.

RESUMEN / SUMMARY: - BACKGROUND CONTEXT: Intramedullary ependymomas constitute the most frequent type of intramedullary tumor. In patients with neurofibromatosis type 2 (NF2), multiple intramedullary ependymomas are known to occur. In the non-NF2 population, however, the presence of multiple synchronous intramedullary ependymomas is exceedingly rare. PURPOSE: In this article, the authors

report the second case in the literature of multiple primary synchronous intramedullary ependymomas. To the best of the authors knowledge, this report represents the first to provide a detailed pathology of all lesions, thereby giving an added level of confidence on the primary synchronous nature of the lesions. The authors have also performed a review of the literature regarding multifocal intramedullary ependymomas. STUDY DESIGN: A review article and case report. CONCLUSIONS: The concomitant localization of two primary intramedullary spinal cord ependymomas in the setting of nongenetic predisposition is an uncommon phenomenon. In this article, the authors present the second report of multiple, synchronous intramedullary ependymomas. A detailed review of the literature reveals that the presence of multiple intramedullary lesions in non-NF2 patients is both rare and deserving of further study.

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[23]

TÍTULO / TITLE: - A rare case of intracranial rosai-dorfman disease mimicking multiple meningiomas. A case report and review of the literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Neuroradiol J. 2012 Nov;25(5):569-74. Epub 2012 Nov 9.

AUTORES / AUTHORS: - Catalucci A; Lanni G; Ventura L; Ricci A; Galzio RJ; Gallucci M

INSTITUCIÓN / INSTITUTION: - Department of Neuroradiology, S. Salvatore Hospital, University of L'Aquila, Italy - alessiacat@tiscali.it.

RESUMEN / SUMMARY: - Rosai-Dorfman disease (RDD) was firstly described in 1969 as a benign proliferative disorder of histiocytes with systemic symptoms and lymphadenopathy. This disease is of uncertain pathogenesis and mostly occurs in children and young adults. The typical clinical features of RDD include bilateral painless cervical lymphadenopathy, but extranodal involvement may also be present. The most common extranodal sites include organs such as the respiratory tract, skin, nasal cavity, orbit and bone. Isolated central nervous system (CNS) manifestations are extremely rare. In case of CNS involvement, the commonest imaging findings are dural-based extra-axial enhancing masses. We describe a case of intracranial RDD mimicking multiple meningiomas both clinically and radiologically in a 57-year-old man presenting with a six-year history of progressive right visual and hearing loss and tinnitus. In cases of multiple extra-axial lesions it is worth bearing in mind the possible differential diagnosis for intracranial RDD and eventually propose to the patient further investigations.

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[24]

TÍTULO / TITLE: - Tailored therapy in diffuse gliomas: using molecular classifiers to optimize clinical management.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Oncology (Williston Park). 2013 Jun;27(6):504-14.

AUTORES / AUTHORS: - Taylor JW; Chi AS; Cahill DP

INSTITUCIÓN / INSTITUTION: - Divisions of Neuro-Oncology and Hematology/Oncology, Department of Neurology, Stephen E. and Catherine Pappas Center for Neuro-Oncology, Massachusetts General Hospital Cancer Center; Boston, Massachusetts, USA.

RESUMEN / SUMMARY: - Diffuse gliomas are the most common primary malignant brain tumors in adults and continue to be almost universally fatal. Nevertheless, a striking variability in outcome has long been observed, with a subset of patients having prolonged survival. Recent molecular discoveries have provided new insights into gliomagenesis and have enhanced clinical subclassification of gliomas. Mutations in the isocitrate dehydrogenase (IDH) genes occur frequently in low-grade astrocytomas and oligodendrogliomas (World Health Organization [WHO] grade II), and in higher-grade gliomas (WHO grades III and IV) that arise after malignant progression of low-grade tumors. IDH mutation has an established role as a favorable prognostic marker; however, the utility of IDH mutation in guiding treatment is still under investigation. A subset of IDH-mutant tumors, predominantly oligodendrogliomas, also harbor codeletion of chromosomes 1 p and 19q, a feature that predicts responsiveness to chemotherapy. Here, we review the current data regarding the prognostic and predictive value of IDH mutation and 1 p/19q codeletion in gliomas. We also discuss possible management algorithms using these biomarkers to tailor surgical and adjuvant therapy for specific diffuse gliomas. Ultimately, understanding the natural history of glioma subtypes and the predictive value of genetic markers may maximize survival and minimize treatment morbidity.

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[25]

TÍTULO / TITLE: - Association of XRCC3 Thr241Met Polymorphisms and Gliomas Risk: Evidence from a Meta-analysis.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Asian Pac J Cancer Prev. 2013;14(7):4243-7.

AUTORES / AUTHORS: - Liang HJ; Yan YL; Liu ZM; Chen X; Peng QL; Wang J; Mo CJ; Sui JZ; Wu JR; Zhai LM; Yang S; Li TJ; Li RL; Li S; Qin X

INSTITUCIÓN / INSTITUTION: - Department of Clinical Laboratory, First Affiliated Hospital of Guangxi Medical University, Nanning, Guangxi, China E-mail : lis8858@126.com, qinxue919@126.com.

RESUMEN / SUMMARY: - The relationship between the X-ray repair cross-complementing group 3 (XRCC3) Thr241Met polymorphism and gliomas remains inclusive or controversial. For better understanding of the effect of XRCC3 Thr241Met polymorphism on glioma risk, a meta-analysis was performed. All eligible studies were identified through a search of PubMed, Elsevier Science Direct, Excerpta Medica Database (Embase) and Chinese Biomedical Literature Database (CBM) before May

2013. The association between the XRCC3 Thr241Met polymorphism and gliomas risk was conducted by odds ratios (ORs) and 95% confidence intervals (95% CIs). A total of nine case-control studies including 3,533 cases and 4,696 controls were eventually collected. Overall, we found that XRCC3 Thr241Met polymorphism was significantly associated with the risk of gliomas (T vs. C: OR=1.10, 95%CI=1.01-1.20, P=0.034; TT vs. CC: OR=1.30, 95%CI=1.03-1.65, P=0.027; TT vs. TC/CC: OR=1.29, 95%CI=1.01-1.64, P=0.039). In the subgroup analysis based on ethnicity, the significant association was found in Asian under four models (T vs. C: OR=1.17, 95%CI=1.07-1.28, P=0.00; TT vs. CC: OR=1.79, 95%CI=1.36- 2.36, P=0.00; TT vs. TC/CC: OR=1.75, 95%CI=1.32-2.32, P=0.00; TT/TC vs. CC: OR=1.11,95% CI=1.02-1.20). This meta-analysis suggested that the XRCC3 Thr241Met polymorphism is a risk factor for gliomas, especially for Asians. Considering the limited sample size and ethnicities included in the meta-analysis, further large scale and well-designed studies are needed to confirm our results.

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[26]

TÍTULO / TITLE: - Radiation Treatment for WHO Grade II and III Meningiomas.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Front Oncol. 2013 Sep 2;3:227.

●● Enlace al texto completo (gratuito o de pago) 3389/fonc.2013.00227

AUTORES / AUTHORS: - Walcott BP; Nahed BV; Brastianos PK; Loeffler JS

INSTITUCIÓN / INSTITUTION: - Department of Neurological Surgery, Massachusetts General Hospital, Harvard Medical School , Boston, MA , USA.

RESUMEN / SUMMARY: - The treatment of meningiomas is tailored to their histological grade. While World Health Organization (WHO) grade I lesions can be treated with either surgery or external beam radiation, WHO Grade II and III lesions often require a combination of the two modalities. For these high-grade lesions, conventional external beam radiation is delivered to either the residual tumor or the surgical resection margin. The optimal timing of radiation, either immediately following surgical resection or at the time of recurrence, is yet to be determined. Additionally, another method of radiation delivery, brachytherapy, can be administered locally at the time of surgery for recurrent lesions. Altogether, the complex nature of WHO grade II and III meningiomas requires careful treatment planning and delivery by a multidisciplinary team.

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[27]

TÍTULO / TITLE: - Olfactory neuroblastoma (esthesioneuroblastoma): towards minimally invasive surgery and multi-modality treatment strategies - an updated critical review of the current literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - J BUON. 2013 Jul-Sep;18(3):557-63.

AUTORES / AUTHORS: - Papacharalampous GX; Vlastarakos PV; Chrysovergis A; Saravakos PK; Kotsis GP; Davilis DI

INSTITUCIÓN / INSTITUTION: - ENT Department, Elpis General Hospital, Athens, Greece.

RESUMEN / SUMMARY: - Olfactory neuroblastoma (esthesioneuroblastoma) was first described by Berger and Luc in 1924. It is considered to be an uncommon malignancy of the nasal cavity. The tumor arises from the specialized sensory epithelial olfactory cells, normally situated at the upper part of the nasal cavity, including the superior nasal concha, the roof of the nose and the cribriform plate. The imaging modalities of choice are computed tomography (CT) and magnetic resonance imaging (MRI). Combination of surgery and radiotherapy (either conventional radiotherapy or stereotactic radiosurgery), with or without chemotherapy is considered to be the standard of care for primary site disease by the majority of researchers. Combined transfacial and neurosurgical conventional approaches are also adopted in many reported cases, mainly due to the endocranial extension and the close anatomic relationship of esthesioneuroblastomas with the ethmoid roof and cribriform plate. Recent literature supports that endoscopic resection correlates with similar oncologic control rates compared with conventional open surgery, provided that basic oncologic surgical principles with clearance of margins and intradural dissection (when required) are completely maintained.

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[28]

TÍTULO / TITLE: - Multiple intracranial meningiomas: a review of the literature and a case report.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Case Rep Surg. 2013;2013:131962. doi: 10.1155/2013/131962. Epub 2013 Aug 29.

●● Enlace al texto completo (gratuito o de pago) 1155/2013/131962

AUTORES / AUTHORS: - Koech F; Orege J; Ndiangui F; Macharia B; Mbaruku N

INSTITUCIÓN / INSTITUTION: - Department of Neurosurgery, Moi University School of Medicine, P.O. Box 4606-30100, Eldoret 30100, Kenya.

RESUMEN / SUMMARY: - Multiple intracranial meningiomas are a condition where there is more than one meningioma in several intracranial locations in the same patient without signs of neurofibromatosis. Incidence varies from 1 to 10%. The prognosis of multiple intracranial meningioma does not differ from benign solitary meningiomas despite the multiplicity. However, the simultaneous occurrence of different grades of malignancy is observed in one-third of multiple meningiomas. Surgery remains the best option for treatment of symptomatic lesions. Our case review aims to present and discuss a 75-year-old female patient diagnosed with multiple intracranial meningiomas, describing their clinical, radiological, histological characteristics. It also highlights the fact that the patient had two tumours, underwent surgery, and so far has a good quality of life.

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[29]

TÍTULO / TITLE: - Pituitary adenomas in childhood and adolescence.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Pediatr Endocrinol Rev. 2013 Jul;10(4):450-9.

AUTORES / AUTHORS: - Jackman S; Diamond F

INSTITUCIÓN / INSTITUTION: - All Children's Hospital, St Petersburg, Florida, USA. suzanne.jackman@allkids.org

RESUMEN / SUMMARY: - Scientific advances are revealing the complexity of pituitary development, which is controlled by multiple transcription factors and signaling molecules. Unregulated pituitary cell growth, resulting in pituitary adenoma, is usually sporadic and results from monoclonal expansion of a single mutated cell. However, some adenomas develop as part of a genetic syndrome. Prolactinoma is the most common hormonally active pituitary adenoma in children. The non-functioning (non-secreting) pituitary adenoma is the second most common and often stains positive for GH, PRL, and/or TSH. While Cushing disease, resulting from an ACTH-secreting adenoma, commonly manifests as weight gain with growth deceleration in children, GH excess causes gigantism with rapid, accelerated growth inappropriate for the height of the family. TSH secreting pituitary adenomas are rare, and biochemical analysis will show an elevated thyroxine level with a non-suppressed or high TSH. Though the natural history of pituitary incidentalomas in children is unknown, adult practice guidelines are established.

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[30]

TÍTULO / TITLE: - Pheochromocytoma - review and biochemical workup.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - S D Med. 2013 Jul;66(7):267, 269-70.

AUTORES / AUTHORS: - Miller RA; Ohrt DW

INSTITUCIÓN / INSTITUTION: - Sanford School of Medicine, University of South Dakota, USA.

RESUMEN / SUMMARY: - A commonly received question in the clinical laboratory is as follows: what is the best test for pheochromocytoma? A widely variable presentation and potentially catastrophic consequence make this a feared neoplasm despite its infrequent encounter. Because various biochemical testing modalities are available, test selection is often confusing. This selection process can be made easier through a better understanding of catecholamine producing neoplasms. The aim of this article is to provide a review of catecholamine producing neoplasms and give recommendations on appropriate test selection.

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[31]

TÍTULO / TITLE: - Lymphoplasmacyte-rich meningioma: our experience with 19 cases and a systematic literature review.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Int J Clin Exp Med. 2013 Aug 1;6(7):504-15. Print 2013.

AUTORES / AUTHORS: - Zhu HD; Xie Q; Gong Y; Mao Y; Zhong P; Hang FP; Chen H; Zheng MZ; Tang HL; Wang DJ; Chen XC; Zhou LF

INSTITUCIÓN / INSTITUTION: - Department of Neurosurgery, Huashan Hospital, Shanghai Medical College, Fudan University Shanghai, China.

RESUMEN / SUMMARY: - Objective: To investigate the clinicopathological characteristics, prognosis, pathology, and differential diagnosis of LPM by analyzing our experience and reviewed relevant literature. We also postulated the necessity of postoperative adjuvant therapy. Methods: 19 patients with LPM underwent surgical treatment from 2007 through 2010 in our department. The clinical charts of the patients, including surgical, histological, and follow-up records, as well as imaging studies, were analyzed retrospectively. Other 43 cases searched from the literature were also included, so that 62 LPM cases were summarized and reviewed together. Results: The summarized 62 patients comprised 30 males and 31 females aged 9 years to 79 years (40.7+/-18.3 years). The most common locations were convexity, skull base, para-sagittal and cervical canal. Multiple or diffuse lesions were found in 8 cases. There were 13 patients had peripheral blood abnormalities (21%). One-third of the cases had moderate to severe peritumoral brain edema. Thirty-eight patients had total resection, 12 patients not specified while 12 received subtotal resection or only biopsy. MIB-1 was available in 24 cases and a third of them were higher than 3%. Follow-up more than 3 year was only completed in 19/62 cases. Seven cases suffered recurrence and two of them died after 2 years of operation. Conclusion: LPM is a very rare benign variant of intracranial meningioma. Both lesions and hematological abnormalities have a predilection for younger individuals. Preoperative diagnosis of this subtype of meningioma is still difficult. Surgical resection is the primary treatment option, and supportive care for those not totally removed is very important, because the recurrence rate for this subtype is rather low. However, the massive infiltration of lymphocytes and plasma cells in LPMs are still controversial and the long-term follow-ups are needed. Radiotherapy is not recommended, and hormonal or immune-inhibitor therapy might be helpful.

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[32]

TÍTULO / TITLE: - Central nervous system cancers.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - J Natl Compr Canc Netw. 2013 Sep 1;11(9):1114-51.

AUTORES / AUTHORS: - Nabors LB; Ammirati M; Bierman PJ; Brem H; Butowski N; Chamberlain MC; Deangelis LM; Fenstermaker RA; Friedman A; Gilbert MR; Hesser D; Holdhoff M; Junck L; Lawson R; Loeffler JS; Maor MH; Moots PL; Morrison T; Mrugala

MM; Newton HB; Portnow J; Raizer JJ; Recht L; Shrieve DC; Sills AK Jr; Tran D; Tran N; Vrionis FD; Wen PY; McMillian N; Ho M

RESUMEN / SUMMARY: - Primary and metastatic tumors of the central nervous system are a heterogeneous group of neoplasms with varied outcomes and management strategies. Recently, improved survival observed in 2 randomized clinical trials established combined chemotherapy and radiation as the new standard for treating patients with pure or mixed anaplastic oligodendroglioma harboring the 1p/19q codeletion. For metastatic disease, increasing evidence supports the efficacy of stereotactic radiosurgery in treating patients with multiple metastatic lesions but low overall tumor volume. These guidelines provide recommendations on the diagnosis and management of this group of diseases based on clinical evidence and panel consensus. This version includes expert advice on the management of low-grade infiltrative astrocytomas, oligodendrogliomas, anaplastic gliomas, glioblastomas, medulloblastomas, supratentorial primitive neuroectodermal tumors, and brain metastases. The full online version, available at NCCN. org, contains recommendations on additional subtypes.

TÍTULO / TITLE: - Imaging of cervical extradural en-plaque meningioma. A case report.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Neuroradiol J. 2012 Nov;25(5):598-603. Epub 2012 Nov 9.

AUTORES / AUTHORS: - D'Amico A; Napoli M; Cirillo M; D'Arco F; D'Anna G; Caranci F; Mariniello G; Brunetti A

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RESUMEN / SUMMARY: - Meningioma is one of the most common spinal extramedullary tumors, largely intradural. An extradural localization is possible but less frequent. There are two morphologically different types of meningioma: one is round, and the other is the "en-plaque" form, that grows along the dura mater like a sheet. The "en-plaque" form, is unusual. We report on an unusual case of epidural and extraspinal "en-plaque" meningioma, describing the MRI and CT features and discussing the possible principal differential diagnosis (neurolymphomatosis, plexiform neurofibromas/schwannomas and metastasis).

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[33]

TÍTULO / TITLE: - Granular cell tumor of the neurohypophysis: Case report and review of the literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Neuro Endocrinol Lett. 2013 Aug 21;34(5):331-338.

AUTORES / AUTHORS: - Saiegh L; Odeh M; Sheikh-Ahmad M; Reut M; Ram Z; Shechner C

INSTITUCIÓN / INSTITUTION: - Department of Endocrinology, Bnai-Zion Medical Center, Haifa, Israel. leonard.saiegh@gmail.com.

RESUMEN / SUMMARY: - A 54-year-old woman presented with a stalk mass that was discovered incidentally with mild visual fields defect. The mass was operated surgically by the fronto-temporal approach, and histology met the diagnosis of neurohypophesial granular cell tumor (GCT). After surgery, the patient suffered from an irreversible severe bi-temporal visual deficit and an irreversible hypopituitarism. We review the literature and discuss the clinical nature of GCTs, treatment options and outcome. In an effort to avoid the severe complications that may result from surgical removal of neurohypophesial GCT, we discuss also the possibility of choosing the conservative approach with close follow-up. The tumor's firm consistency, tendency to hemorrhage, involving the pituitary stalk and lack of dissection plane from basal brain structure render surgery difficult, and maximal resection often requires sacrificing the stalk. Moreover, small asymptomatic neurohypophysial GCTs are common findings, most probably benign tumors with slow growing nature. Hence, for a neurohypophesial tumor which is suspected to be a GCT, we offer to consider the alternative approach, with close clinical, visual field and radiological study follow up.

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[34]

TÍTULO / TITLE: - Gangliocytic paraganglioma of the appendix with features suggestive of malignancy, a rare case report and review of the literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Int J Clin Exp Pathol. 2013 Aug 15;6(9):1948-52.

AUTORES / AUTHORS: - Abdelbaqi MQ; Tahmasbi M; Ghayouri M

INSTITUCIÓN / INSTITUTION: - Department of Anatomic Pathology, H. Lee Moffitt Cancer Center and Research Institution Tampa, Florida ; Department of Pathology and Cell Biology, University of South Florida Tampa, Florida, USA.

RESUMEN / SUMMARY: - We report a case of appendicial paraganglioma in a 40 year old female who presented with acute appendicitis and underwent laparoscopic appendectomy. To the best of our knowledge this is the first reported case of appendicial gangliocytic paraganglioma with features suggestive of malignancy in the modern literature. Van Eeden S. et al. reported the first case of appendicial paraganglioma in a 47 year old man who also presented with acute appendicitis. The appendectomy specimen showed a distended appendix with thickened wall, and a 1.3 cm mucosal based yellow lesion. Microscopically this lesion was centered in the submucosa and consisted of three different cell types: (a) epithelioid cells with pale eosinophilic finely granular cytoplasm containing bland oval nucleus with stippled chromatin, that form solid nests lying in a trabecular pattern and in formations reminiscent of 'Zellballen' as seen in paragangliomas (b) second type cells have large vesicular nuclei with prominent nucleoli and abundant cytoplasm that are scattered singly, (c) third type cells with bland elongated nuclei form broad fascicle and envelop the epithelioid and ganglion cells. Immunohistochemical analysis showed the epithelioid cell nests immunoreactive for synaptophysin and the ganglion-like cells and

spindle Schwann cells to be immunoreactive for S100 protein, whereas all three cells populations were negative for CAM5.2 and Pancytokeratin. We do believe that an accurate diagnosis of Gangliocytic paraganglioma (GP) of the appendix was rendered, detailed microscopic examination of doubled hematoxylin and eosinophil stained sections as well as the immunohistochemical phenotype of the three components have been undertaken to confirm the diagnosis of GP.

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[35]

TÍTULO / TITLE: - Hypercortisolaemia due to ectopic adrenocorticotropic hormone secretion by a nasal paraganglioma: a case report and review of the literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - BMC Res Notes. 2013 Aug 19;6:331. doi: 10.1186/1756-0500-6-331.

●● Enlace al texto completo (gratuito o de pago) 1186/1756-0500-6-331

AUTORES / AUTHORS: - Thomas T; Zender S; Terkamp C; Jaeckel E; Manns MP

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RESUMEN / SUMMARY: - BACKGROUND: Adrenocorticotropic hormone-producing extraadrenal paragangliomas are extremely rare. We present a case of severe hypercortisolemia due to ectopic adrenocorticotropic hormone secretion by a nasal paraganglioma. CASE PRESENTATION: A 70-year-old Caucasian woman, was emergently admitted to our department with supraventricular tachycardia, oedema of face and extremities and hypertensive crisis. Initial laboratory evaluation revealed severe hypokalemia and hyperglycemia without ketoacidosis, although no diabetes mellitus was previously known. Computed tomography revealed a large tumor obliterating the left paranasal sinus and a left-sided adrenal mass. After cardiovascular stabilisation, a thorough hormonal assessment was performed revealing marked adrenocorticotropic hormone-dependent hypercortisolism. Due to the presence of a cardiac pacemaker magnetic resonance imaging of the hypophysis was not possible. [68Ga-DOTA]-TATE-Positron-Emission-Tomography was performed, showing somatostatin-receptor expression of the paranasal lesion but not of the adrenal lesion or the hypophysis. The paranasal tumor was resected and found to be an adrenocorticotropic hormone-producing paraganglioma of low-proliferative rate. Postoperatively the patient became normokaliaemic, normoglycemic and normotensive without further need for medication. Genetic testing showed no mutation of the succinatdehydrogenase subunit B- and D genes, thus excluding hereditary paragangliosis. CONCLUSION: Detection of the adrenocorticotropic hormone source in Cushing's syndrome can prove extremely challenging, especially when commonly used imaging modalities are unavailable or inconclusive. The present case was further complicated by the simultaneous detection of two tumorous lesions

of initially unclear biochemical behaviour. In such cases, novel diagnostic tools - such as somatostatin-receptor imaging - can prove useful in localising hormonally active neuroendocrine tissue. The clinical aspects of the case are discussed and relevant literature is reviewed.

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[36]

TÍTULO / TITLE: - Successful management of presacral ganglioneuroma: A case report and a review of the literature.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Int J Surg Case Rep. 2013;4(10):933-5. doi: 10.1016/j.ijscr.2013.07.032. Epub 2013 Aug 15.

●● Enlace al texto completo (gratuito o de pago) 1016/j.ijscr.2013.07.032

AUTORES / AUTHORS: - Lynch NP; Neary PM; Fitzgibbon JF; Andrews EJ

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RESUMEN / SUMMARY: - INTRODUCTION: Presacral ganglioneuromas are rare, usually benign lesions. Patients typically present when the mass is very large and becomes symptomatic. PRESENTATION OF CASE: This report describes the case of a 42 year old lady presenting with back pain who was subsequently diagnosed with a presacral ganglioneuroma based on MR imaging and a CT guided biopsy of the lesion. DISCUSSION: After counselling regarding nonoperative management, the patient opted for surgical resection. Open resection was performed with preservation of the neurovascular pelvic anatomy and an uneventful postoperative recovery. A review of the relevant literature was also performed using a search strategy in the online literature databases PUBMED and EMBASE. CONCLUSION: Surgical resection of a presacral ganglioneuroma is reasonable given their propensity for local effects and reported potential malignant transformation.

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[37]

TÍTULO / TITLE: - The Role of Microglia and Matrix Metalloproteinases Involvement in Neuroinflammation and Gliomas.

RESUMEN / SUMMARY: - Enlace al Resumen / Link to its Summary

REVISTA / JOURNAL: - Clin Dev Immunol. 2013;2013:914104. Epub 2013 Aug 14.

●● Enlace al texto completo (gratuito o de pago) 1155/2013/914104

AUTORES / AUTHORS: - Konnecke H; Bechmann I

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RESUMEN / SUMMARY: - Matrix metalloproteinases (MMPs) are involved in the pathogenesis of neuroinflammatory diseases (such as multiple sclerosis) as well as in the expansion of malignant gliomas because they facilitate penetration of anatomical barriers (such as the glia limitans) and migration within the neuropil. This review

elucidates pathomechanisms and summarizes the current knowledge of the involvement of MMPs in neuroinflammation and glioma, invasion highlighting microglia as major sources of MMPs. The induction of expression, suppression, and multiple pathways of function of MMPs in these scenarios will also be discussed. Understanding the induction and action of MMPs might provide valuable information and reveal attractive targets for future therapeutic strategies.
