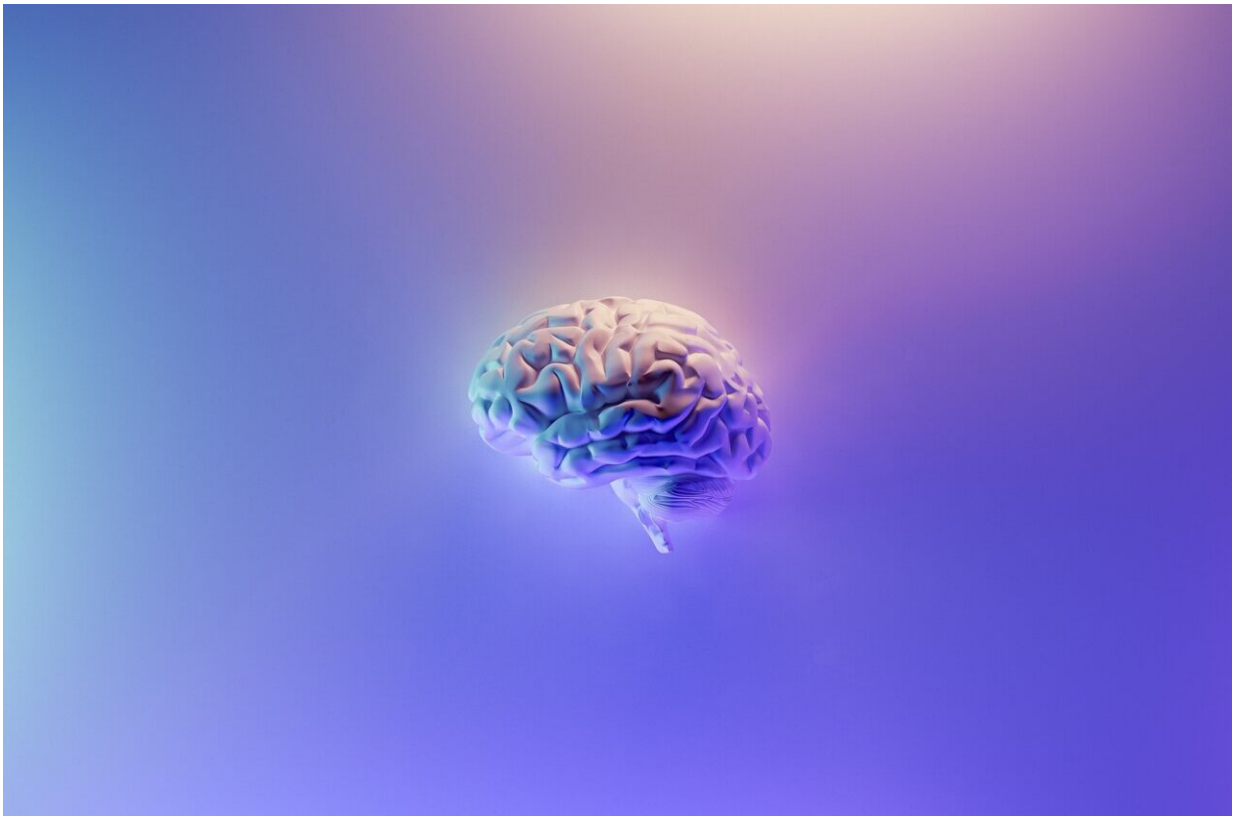


New guidelines for the diagnosis and treatment of brain metastases

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Brain metastases are a common and dangerous complication in cancer patients. Under the leadership of experts from MedUni Vienna, two of the largest international oncology societies have published new clinical

guidelines for the diagnosis and treatment of brain metastases from solid tumors. The recommendations have recently been published in the leading journal *Annals of Oncology* (impact factor 33).

For the majority of patients, the aim of treating [brain metastasis](#) is to prevent or delay neurological deterioration, thereby prolonging survival with an acceptable quality of life. A minority of patients, especially those with small and few lesions, may experience long-term survival or even complete recovery. Medicine has made great progress in this area in recent years, not least thanks to research conducted at MedUni Vienna. The recently published joint recommendations, from the European Association of Neuro-Oncology (EANO) and the European Society for Medical Oncology (ESMO), for the diagnosis and treatment of parenchymal [brain metastases](#) from solid tumors include the very latest methods for prevention, diagnosis, treatment, and follow-up. The multidisciplinary recommendations are a valuable source of information for doctors and other service providers, as well as informed patients and their families.

Modern cancer medicine is personalized medicine

"Brain metastases are the focus of research within our division," explains lead last author Matthias Preusser, Head of the Division of Oncology at the Department of Internal Medicine I of MedUni Vienna and Vienna General Hospital and current President of the EANO. "We have recently made a great deal of progress in the biological understanding, diagnosis and treatment of brain metastases—advances that we were able to incorporate into these new Guidelines."

In the field of diagnostics, the liquid biopsy method is becoming increasingly important, as well as the examination of tumor tissue. Molecular analyses of blood or cerebrospinal fluid samples reveal genetic changes that can be used as a basis for selecting targeted, modern

treatments. "Modern cancer medicine is personalized medicine," explains co-author Anna Berghoff from MedUni Vienna, "individually targeted treatments and immunotherapies are a therapeutic approach that offers great potential."

Recognizable successes have been achieved in treatment over the last few years. "Response rates have been significantly increased in the treatment of brain metastases resulting from melanoma (skin cancer)," explains Preusser. Now, up to 60% of patients with asymptomatic brain metastases of melanoma can achieve sustained remissions in the brain for years with the combination of two immunotherapies.

Response rates well in excess of 50% are also achieved with personalized treatments for [brain](#) metastases of lung cancer and breast [cancer](#), especially when oncogenic mutations or gene amplifications are present in the tumors. "Brain metastases are still among the most serious situations in oncology; however, advances in [oncology](#) based on [biological research](#) are leading to longer and better survival for some of our patients. These successes provide us with an immense amount of motivation to continue our research work in this direction at our department and in international alliances," says Preusser.

More information: E. Le Rhun et al, EANO–ESMO Clinical Practice Guidelines for diagnosis, treatment and follow-up of patients with brain metastasis from solid tumours, *Annals of Oncology* (2021). [DOI: 10.1016/j.annonc.2021.07.016](https://doi.org/10.1016/j.annonc.2021.07.016)

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