

Oligodendroglioma (WHO Grade II)

Slowly growing, diffusely infiltrating tumours showing a predilection for the frontal lobes, often with areas of calcification, and often characterised by a long history of seizures.

Treatment: surgical removal to the maximum extent without causing neurological deficit is the treatment of choice whenever possible. Chemotherapy is administered either alone as a treatment regimen, or following surgery. Radiation is indicated in cases of recurrence or in cases malignant transformation.

Prognosis: being relatively sensitive to chemotherapy, this gives them a more favourable prognosis. Median survival rate may be up to 10 years.