Treatment for oligodendroglioma

Useful information for cancer patients

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You can view this information in a larger print on our website.

Oligodendroglioma treatment

Oligodendrogliomas are a type of glioma brain tumour. Oligodendrogliomas develop from cells called oligodendrocytes. These cells make a white fatty substance that covers nerves, called myelin. It helps the nerve signals (impulses) to travel along the nerves more quickly.

The treatment depends on whether it is a slowly growing type (low grade or grade 2) or a faster growing type (grade 3 or anaplastic tumour).

Low grade oligodendroglioma

Some low grade oligodendrogliomas grow very slowly and your treatment team may suggest that you have regular monitoring with MRI scans or CT scans at first. Some tumours do not change for many months or years.

If the tumour is causing symptoms, is large, or has signs on the scans that it could be high grade, your doctors will recommend a biopsy or surgery to remove the tumour. Oligodendrogliomas tend to grow into the brain tissue surrounding the main tumour and this makes them difficult to remove completely. Often, some tumour is left behind after surgery.

If the tumour is a very slowly growing type your doctor may recommend that you don't have further treatment straight after the surgery but wait to see if the tumour causes symptoms.

If the tumour is large or causes symptoms your treatment team will recommend radiotherapy or chemotherapy treatment after the surgery. Chemotherapy may work best in people whose tumour cells have a particular gene change called an 1p19q co-deletion. Either a combination chemotherapy treatment called PCV (procarbazine, CCNU (lomustine) and vincristine) or a drug called temozolomide may be used.

If the tumour starts to grow again after treatment you usually have radiotherapy if you have already had chemotherapy. If you have already had radiotherapy you usually have chemotherapy. Some people have surgery to remove as much of the tumour as possible before having radiotherapy or chemotherapy.
High grade oligodendroglioma

High grade oligodendrogliomas tend to glow brightly (enhance) on a CT scan or MRI scan when a particular drug (called contrast) is injected into the bloodstream. You usually have surgery to remove the tumour. It is not usually possible to remove all of it.

After the surgery you usually have radiotherapy treatment for 6 weeks to control the tumour. Two trials were published in 2012 that showed that chemotherapy before or after the radiotherapy could help some people live longer. The people it helped had a particular gene change called an 1p19q co-deletion. So your doctor may offer you chemotherapy treatment if your tumour cells have this gene change.

The most common chemotherapy drug combination for oligodendroglioma is PCV – procarbazine, CCNU (lomustine) and vincristine.

If the oligodendroglioma starts to grow again after treatment your doctors may recommend further surgery or more chemotherapy. Or they may suggest more radiotherapy.

For more information, visit our website http://www.cruk.org/about-cancer

You will find a wide range of detailed, up to date information for people affected by cancer, including a clinical trials database that you can search for trials in the UK. Our information is based on the best current scientific evidence and reviewed regularly by leading clinicians and experts in health and social care.

For answers to your questions about cancer call our Cancer Information Nurses on 0808 800 4040 9am till 5pm Monday to Friday.