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Drug Therapy for Glioma

Guest Editors:

Dr. Kok Siong Chen

Center for Stem Cell and
Translational Immunotherapy,
Department of Neurosurgery,
Brigham and Women's Hospital,
Harvard Medical School, Boston,
MA, USA

Dr. Lucia Moreno-Lama

Center for Stem Cell and
Translational Immunotherapy,
Department of Neurosurgery,
Brigham and Women's Hospital,
Harvard Medical School, Boston,
MA, USA

Dr. Filippo Rossignoli

Center for Stem Cell and
Translational Immunotherapy,
Department of Neurosurgery,
Brigham and Women's Hospital,
Harvard Medical School, Boston,
MA, USA

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Message from the Guest Editors

Gliomas are the most common brain tumors originating from glial cells. Among the malignant gliomas, grade IV glioma, or glioblastoma (GBM), is the most aggressive form. Despite advances in surgery, radiotherapy and chemotherapy, the median survival of GBM patients remains at just 12–15 months. Adjuvant chemotherapy is an important treatment component, yet standard systemic routes often demonstrate toxicity and limited crossing through the blood–brain-barrier. Due to the significant inter-tumoral molecular heterogeneity of GBMs, biomarker-driven therapy that targets specific alterations in GBM is increasingly recognized as the optimum method to improve patient outcomes and reduce toxicity. Therefore, more pre-clinical and clinical trials are urgently needed to explore and evaluate the feasibility of targeted therapy with the corresponding biomarkers for effective treatment options.

This Special Issue aims to review the potential novel drug agents, and the current status of preclinical and clinical trials, and explore the challenges and future perspectives in glioma drug therapy.



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Special Issue



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Editor-in-Chief

Prof. Dr. Amélia Pilar Rauter

Departamento de Química e Bioquímica (DQB) e Centro de Química Estrutural (CQE), Institute of Molecular Sciences, Faculdade de Ciências, Universidade de Lisboa, Lisboa, Portugal

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Pharmaceuticals Editorial Office
MDPI, Grosspeteranlage 5
4052 Basel, Switzerland

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