

Special Issue

Radiotherapy for Brain Metastasis and Long-Term Survival

Message from the Guest Editors

Stereotactic radiosurgery (SRS) improves the local control of brain metastases. The QUARTZ trial revealed that whole-brain radiotherapy (WBRT) provides limited benefits, for patients with brain metastases from non-small cell lung cancer. The literature data revealed that poor overall survival after WBRT was associated with poor performance status, older age, >3 intracranial metastases, and uncontrolled primary tumors. WBRT offers no substantial benefit to most patients with brain metastases from lung cancer in terms of improved survival, overall quality of life, or reduction in steroid use. The implication for clinical care is that optimal supportive care is as effective as supportive care plus WBRT, and the implication for future research is that potential new treatments could be assessed in addition to supportive care, rather than in addition to, or in place of, WBRT. Given the lack of long-term analyses of the benefits of radiotherapy in this setting, it is necessary to compare the long-term results of radiotherapy for brain metastases. We encourage authors to submit original research articles, reviews, systematic reviews, case reports, clinical outcome studies, etc.

Guest Editors

Dr. Antonio Pontoriero

Radiotherapy Unit, University of Messina, Messina, Italy

Dr. Alfredo Conti

Unit of Neurosurgery, IRCCS Istituto delle Scienze Neurologiche di Bologna, 40139 Bologna, Italy

Deadline for manuscript submissions

closed (29 February 2024)



Medicina

an Open Access Journal
Published by MDPI

Impact Factor 2.4
CiteScore 3.3
Indexed in PubMed



mdpi.com/si/180972

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4052 Basel, Switzerland
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Prof. Dr. Edgaras Stankevičius
Medical Academy, Lithuanian University of Health Sciences, Kaunas,
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