Special Issue

Glioblastoma: Current Status and Future Prospects

Message from the Guest Editor

Glioblastoma (GBM) is the most common and lethal primary brain tumor in adults. Despite aggressive treatment modality, the current standard treatment regimen only provides palliation with a median survival of less than 15 months and a 5-year survival rate of 5% after initial diagnosis. However, in recent years, there has been an emergence of large interest in the development of targeted therapies for glioblastoma owing to its profound levels of genomic aberrations. Major molecular-mediated therapeutic approaches consist of targeting various oncogenic pathway-encoding molecules, including EGFR, PI3K/AKT/mTOR, VEGF, MET, FGFR, BRAF, cell cycle, and TGFb. On the other hand, immunotherapies focus on the disruption of immune checkpoint molecules that are expressed in T cells or tumor cells, such as PD-1, PD-L1, CTLA-4, LAG-3, TIM3, and TIGIT. Given the complexity of genomic architecture and microenvironment composition in GBM, future target-mediated investigations could open up new opportunities for innovative treatments.

Guest Editor

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