

O5D1	
Title	Meningioma Profile in Egyptian Patients
Author(s)	Eman Abdelzaher*, Nevine M.F. El Deeb*, Ahmed G. Gowil**, Ahmed Yehya*** Affiliation: Departments of *Pathology, **Oncology and Nuclear Medicine, and ***Neurosurgery, Faculty of Medicine, University of Alexandria, Alexandria, Egypt.
E-mail	pathologisteman@yahoo.com
Aim	This work was designed to study the biological and demographic characteristics of meningioma and their impact on tumor recurrence in Egyptian patients.
Materials & Methods	A cohort of 265 Egyptian patients with meningioma were studied. Immunohistochemistry for VEGF, Ki67, PR, CD20 and CD3 was performed on tissue microarray blocks. Statistical analysis was used to detect independent predictors of recurrence.
Result	<p>Adults represented 98.9% of cases, with female preponderance (M: F ratio = 1:2.4). Histologically, 78.10% of cases were grade I, 19.20% grade II and 2.60% grade III. Transitional variant was the most common (43.40%).</p> <p>VEGF expression (38.50% of cases) correlated positively with perifocal edema, tumor size and proliferative index (PI).</p> <p>PR expression (64.5% of cases) correlated inversely with the mean PI (3.75).</p> <p>Lymphocytic aggregates were detected in 7.20% of cases, with a mean CD20:CD3 ratio =1:10.1.</p> <p>In a multivariate analysis, only tumor size, PR expression and necrosis predicted recurrence independently. Using ROC curve, size was the best predictor for tumor recurrence with a cut-off point of >6 cm and an excellent negative predictive value (97.6%).</p>
Conclusion	<p>The studied meningiomas have general demographic and clinicopathological profile in common to that reported from other countries with some interesting and distinctive differences.</p> <p>Statistical analysis, including all clinicopathological factors and expression of biomarkers, showed that tumor size was the best recurrence predictor factor. Thus, tumor size greater than 6 cm can identify meningiomas with a high risk of recurrence, which could be beneficial for planning tailored optimal surgical and follow-up strategies.</p>