Brain Tumor Management Guide

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Opinion

Published by Kementerian Kesehatan Republik Indonesia, brain cancer accounts for about 85-90% of all central nervous system cancers. In the United States the incidence of malignant and benign brain cancers is 21.42 per 100,000 population per year (7.25 per 100,000 population for malignant brain cancer; 14.17 per 100,000 population per year for benign brain tumors). The incidence rate for malignant brain cancers worldwide based on the world population standard rate is 3.4 per 100,000 population. The mortality rate is 4.25 per 100,000 population per year. Mortality is higher in men. Cancer registry data from RSK Dharmais, RSCM, Friendship Hospital, IAPI, KPKN. Of all the primary central nervous system tumors, anaplastic astrocytes and glioblastoma multiforme (GBM) account for about 38% of the total, and other 27% mesenchymal meningiomas and tumors. The rest consists of various primary brain tumors, including pituitary tumors, schwannoma, CNS lymphoma, oligodendroglioma, ependimoma, low-grade astrocytoma, and medulloblastoma.

The problem in this book is that brain cancer requires multidisciplinary management, while there is no national uniformity in the therapeutic approach. In addition, there are gaps in human resource facilities and equipment/system resources from various health service facilities/institutions, whether for screening, diagnostics, or therapy, so that a standard professional policy is needed so that each facility can play an optimal role in the management of brain cancer in Indonesia. The purpose of this book is to reduce the morbidity of brain cancer in Indonesia, to establish evidence based medicine guidelines to assist medical personnel in diagnosing and managing brain cancer, supporting early diagnostic efforts in the general population and high risk groups, improving referral, recording, and reporting consistent, recommending primary and tertiary health care facilities and policy makers for the preparation of local protocols or Clinical Practice Guidelines (KDP), by adaptation to the National Guidelines for Medical Services (PNPK). Target audience is the entire range of health workers involved in the management of brain cancer, in accordance with the relevance of duties, authority, and the conditions of facilities and infrastructure available at their respective health services and policy makers within the hospital, educational institutions and related professional groups.

The methodology used is library search. Library search is done electronically and manually. Secondary evidence searches in the form of clinical trials, meta-analyses, randomized controlled trials, systematic review or systematic evidence-based guidelines are performed on the Cochrane Systematic Database Review website, and include all the terms in the Medical Subject Heading (MeSH). Primary proof searches are performed on the Pubmed, Medline, and TRIPDATABASE search engines with the appropriate keywords. Manual searches are done in the library of review articles and textbooks written in the last 5 years. All the evidence obtained has been done critical review by a competent specialist/subspecialist in accordance with the expertise of each science.