

## **Abstract:**

**OBJECTIVE:** To study the frequency, mode of presentation and outcome following treatment of gliomas in patients treated at the Kenyatta National Hospital. **DESIGN:** A retrospective study. **SETTING:** Kenyatta National Hospital, Nairobi, between January 1984 and December 1993. **SUBJECTS:** Two hundred and fourteen patients with intracranial tumours who underwent brain surgery at the Kenyatta National Hospital. **RESULTS:** Two hundred and fourteen histologically confirmed intracranial tumours were seen at the Kenyatta National Hospital between 1984 and 1993. Ninety seven (45.8%) of these were gliomas of which eighty one were astrocytomas, ten ependymomas and six oligodendrogliomas. Meningiomas were the next common tumours (34.4%). Gliomas affected the young age group most, with the peak in the first decade of life. Males were most affected with a male to female ratio of 1.4:1. Features of increased intracranial pressure were the commonest mode of clinical presentation. The parietal region was the commonest site of intracranial gliomas (37.5%). Surgery and radiotherapy were the main forms of definitive/palliative treatment given. The two year survival rate was 25%, for patients who had undergone total tumour excision with or without radiotherapy. Tumour debulking only without post-operative radiotherapy was associated with a seven per cent two year survival rate. **CONCLUSION:** Gliomas were the commonest intracranial tumours (45.8%) seen at the Kenyatta National Hospital over a ten year period (1983-1994). Radical surgery with or without radiotherapy was associated with a 25% two year survival rate, debulking and radiotherapy with 20% two year survival, biopsy and radiotherapy with 20% two year survival and debulking only with a seven per cent two-year survival. Gliomas are less commonly seen in the Kenyan African in comparison with rates of occurrence in the Caucasian race.