receiving said chemotherapeutic without the anti-VEGF antibody . In another embodiment, the median progression-free survival time is prolonged by at least 4 months or greater with a hazard ratio (HR) equal to 0.64, as compared to a glioblastoma patient receiving said chemotherapeutic without the anti-VEGF antibody . In another embodiment, the median progression-free survival time is prolonged by at least 4 months or greater with a hazard ratio (HR) from about 0.55 to about 0.74, as compared to a glioblastoma patient receiving said chemotherapeutic without the anti-VEGF antibody . In another embodiment, the median progression-free survival time is prolonged by about 4.4 months with a hazard ratio (HR) from about 0.55 to about 0.74, as compared to a glioblastoma patient receiving said chemotherapeutic without the anti-VEGF antibody . In yet another embodiment in the methods described above, the patient is less than 65 years old. In yet another embodiment in the methods described above, the patient is equal to or greater than 65 years old. In one embodiment in the methods described above, the patient has a treatment free interval (TFI) of about 4 weeks.

**[0008]** In one ~~aspect~~ embodiment, there is provided a kit comprising an anti-VEGF antibody binding essentially to epitope A4.6.1, a chemotherapeutic and a package insert or label with instructions to treat a patient diagnosed with glioblastoma comprising administering to said patient an effective amount of an anti-VEGF antibody and a chemotherapeutic, wherein said patient received two or fewer prior anti-cancer regimens, wherein said treatment prolongs said patient's median progression-free survival time as compared to a glioblastoma patient receiving said chemotherapeutic without the anti-VEGF antibody . In one embodiment of the kit described above, the anti-VEGF antibody is bevacizumab and said chemotherapeutic is temozolomide.

## BRIEF DESCRIPTION OF THE DRAWINGS

**[0009]** Figure 1 shows the two-arm Phase III study design treatment sequence as disclosed in more detail in Example 1. Study treatment started between 4 and 7 weeks after debulking surgery or biopsy of the glioblastoma and included 3 different phases: A Concurrent Phase during which 10 mg/kg bevacizumab or placebo was administered every two weeks in combination with temozolomide and radiotherapy followed by a treatment break of 28 days, a Maintenance Phase during which 10

13. The use of claim 9, wherein subsequent administrations of said anti-VEGF antibody are either prior to or after said chemotherapeutic.
14. The use of claim 1, wherein said anti-VEGF antibody is to be administered concurrently with said chemotherapeutic.
15. The use of claim 1, wherein said median progression-free survival time is prolonged by about 4.4 months with a hazard ratio (HR) equal to 0.64, as compared to a glioblastoma patient receiving said chemotherapeutic without the anti-VEGF antibody.
16. The use of claim 1, wherein said median progression-free survival time is prolonged by at least 4 months or greater with a hazard ratio (HR) equal to 0.64, as compared to a glioblastoma patient receiving said chemotherapeutic without the anti-VEGF antibody.
17. The use of claim 1, wherein said median progression-free survival time is prolonged by about 4.4 months with a hazard ratio (HR) from about 0.55 to about 0.74, as compared to a glioblastoma patient receiving said chemotherapeutic without the anti-VEGF antibody.
18. The use of claim 1, wherein said median progression-free survival time is prolonged by at least 4 months or greater with a hazard ratio (HR) from about 0.55 to about 0.74, as compared to a glioblastoma patient receiving said chemotherapeutic without the anti-VEGF antibody.
19. The use of claim 15, 16, 17, or 18, wherein said patient is less than 65 years old.
20. The use of claim 15, 16, 17, or 18, wherein said patient is equal to or greater than 65 years old.

~~21. A kit comprising an anti-VEGF antibody binding essentially to epitope A4.6.1, a chemotherapeutic and a package insert or label with instructions to treat a patient diagnosed with a glioblastoma comprising administering to said patient an effective amount of an anti-VEGF antibody and a chemotherapeutic, wherein said patient received two or fewer prior anti-cancer regimens, wherein said treatment prolongs said patient's median progression-free survival time as compared to a glioblastoma patient receiving said chemotherapeutic without the anti-VEGF antibody.~~

~~22. The kit in claim 21, wherein said anti-VEGF antibody is bevacizumab.~~