

Book report

Breast Cancer Therapy Annual – today's drug treatment of cancer?

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Breast Cancer Therapy Annual is a concise and excellent summary of the developments in the systemic therapy of breast cancer over the past 5 years. As such it would be as good a book as any other I have read for doctors training in the management of breast cancer, or other clinicians who desire to bring their knowledge up to date. Similarly, it would be suitable for non-clinical researchers who want to update their knowledge of contemporary drug treatment of breast cancer at the start of the 21st century.

The authors are a well-chosen group of international opinion leaders whose knowledge of the clinical management of breast cancer is exemplary. However, they have not delved into the depths of that knowledge for this slim and readable volume. The title suggests that one could quickly get up to date with current thinking on the management of breast cancer, whereas I felt that the majority of the contributors took the opportunity to cover where we have been for the last five years, and less on the most recent developments. Some of this is undoubtedly the inevitable gap between writing and appearing in print, but there remains an inconsistent inclusion of data available at the end of 2001. The title is also somewhat misleading – this was an opportunity to recognise that drug therapy is not the only effective approach in the era of true multi-disciplinary management: but surgical and radiotherapeutic developments get virtually no mention! On the other hand there is an excellent chapter devoted to women with BRCA1 & BRCA2, for which there is no systemic therapy with proven survival benefits! There is also the inevitable tension that spans the Atlantic Ocean, with less coverage of European approaches by the North American contributors, and a bias towards what is standard of care in parts of the USA. For example, the introduction assumes that

tamoxifen is given to all women with a diagnosis of DCIS, which is certainly not the case in Europe!

There are some serious omissions, such as the absence of any discussion on the possible advantage for taxanes in tumours with p53 mutations (nor the randomised EORTC trial testing this hypothesis). Surprising omissions in the chapter on endocrine therapy are the lack of any of the comparative data between the aromatase inhibitors and tamoxifen in advanced disease, any mention of the pure anti-oestrogen faslodex, or any discussion on the use of these agents pre-operatively, and this was undoubtedly the weakest chapter in the whole book.

For me the best chapters were those which covered the EGF receptor family data, and the Ras pathway and inhibitors, where a clear summary of the science was followed by a robust coverage of the clinical data on such biologically directed therapies.

Despite some reservations, this book does form an excellent and readable summary covering the last 5 years. Over the past 12 months there have been some considerable developments in systemic therapy of breast cancer, and it is somewhat disappointing that these are not included in a book with a publication date of 2003.

Competing interests

None declared.

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