Chairman's Letter



In this month's issue of *The American Journal of Hematology/Oncology*, a peer-reviewed resource of oncology education and the official journal of Physicians' Education REsource[®], LLC, we explore two manuscripts involving breast cancer, a study in an ethnically diverse population involving patients with ovarian cancer, a review of the use of positron emission tomography/computed tomography (PET/CT) in refractory Hodgkin lymphoma, and a CME manuscript that focuses on liquid biopsy in the management of solid tumors.

Ding and colleagues describe a case report involving a patient with metaplastic squamous cell carcinoma of the breast, a very rare cancer. The patient, a 67-year old previously healthy Asian woman, was referred to the authors' clinic after a newly diagnosed right breast cancer. The authors note that the rarity of primary metaplastic SCC of the breast and the aggressiveness of this disease has led to poor outcomes in response to chemotherapeutic regimens. Because standard chemotherapy and hormonal therapy approaches have not proven to be optimal, further laboratory research is needed.

The second breast cancer manuscript involves a literature review that evaluated the current state of evidence regarding treatment plans based on the retest results of metastatic tumors when they were different from the primary tumor. Pannell and colleagues conducted a retrospective observational study designed to validate the literature findings, and data from the University of Tennessee Cancer Institute were queried for patients with recurrent metastatic breast cancer (MBC) from 2000 to 2014. The query yielded 124 complete and relevant recurrent MBC records. The study demonstrates that first-line treatment plans for patients with MBC based on the receptor status of the primary tumor instead of the metastatic tumor receptor status extends life expectancy of patients.

Safra and colleagues present a study that updates a previous study in which they explored BRCA mutation type variability in a retrospective cohort comprised of 190 stage IV BRCA-tested patients with epithelial ovarian cancer (EOC) from New York, Israel, and Italy who were diagnosed between 1995 and 2009. The authors note that the present paper extends the analysis to include 585 BRCA-tested patients with EOC from the same medical centers diagnosed between 1995 and 2014.

18F-fluorodeoxyglucose-positron emission tomography (FDG-PET) has been the most important advance in the assessment of Hodgkin lymphoma (HL) since the introduction of computed tomography (CT), according to Jauhari and Nasta in "PET/CT in the Evaluation of Relapsed or Refractory Hodgkin Lymphoma." They note that in the frontline management of HL, FDG-PET combined with low-dose CT has emerged as the modality of choice for staging and treatment response assessment. PET/CT is an important tool in relapsed or refractory Hodgkin lymphoma, providing prognostic information and guiding decision making after frontline therapy and before stem cell transplantation.

The CME article this month focuses on the use of liquid biopsy to analyze circulating tumor cells (CTCs) or cell-free circulating tumor DNA (ctDNA) in the blood of patients with solid tumors. Liquid biopsy has the potential to detect early disease, predict prognosis, monitor tumor progression over time, and track treatment efficacy or resistance without exposing patients to the risks associated with invasive tissue sampling.

As we continue to provide the latest research and explore interesting topics in oncology, we welcome your ongoing direction and feedback. I look forward to hearing from you.

Michael J. Hennessy, Sr Chairman and Chief Executive Officer

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