advanced bladder cancer operable in most patients. By doing so patients may be spared potential local complications such as recurrent bleeding, irritative symptoms and pelvic pain.

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Corrections

The Defence for the U.K. DCIS Trial—The first sentence of this paper (*European Journal of Cancer* 1993, **29A**, p. 430) should have read "The U.K. ductal carcinoma *in situ* (DCIS) trial started in May 1990, after a gestation period of 18 months, having been designed by a multidisciplinary committee." It was previously stated that the trial started in May 1991 after a gestation period of 36 months.

The Economic Impact of 5-HT$_3$ Receptor Antagonists—The following letter was originally published in *The European Journal of Cancer*, Vol. 29A, No. 8, p. 930. Unfortunately, a table unrelated to the letter was placed in the text. This has now been removed.

The Economic Impact of 5-HT$_3$ Receptor Antagonists

K. Cunningham, J. Hirsch and A. Freeman

JONES AND COLLEAGUES present data on the budgetary impact of the 5-HT$_3$ receptor antagonists [1]. However, their model makes no attempt to quantify the financial and resource benefits of using the 5-HT$_3$ receptor antagonists in terms of their enhanced efficacy and tolerability (i.e. the costs associated with caring for a patient experiencing emesis or the side-effects of conventional antiemetics). In this regard it is of particular interest that Jones *et al.* suggest that the use of the 5-HT$_3$ receptor antagonists is not justified over the delayed emesis period. They have ignored data in the literature that report good efficacy for oral ondansetron over this period [2–4], and show that it is superior to placebo and metoclopramide following cisplatin [5] and non-cisplatin [6] chemotherapy, respectively. Clearly, the role of the 5-HT$_3$ receptor antagonists over this period needs to be further defined; in particular, to quantify the additional benefits resulting from their enhanced tolerability and impact on patients' quality of life [7, 8]. Conventional antiemetics have a significant propensity for side-effects, e.g. extrapyramidal reactions and sedation which are associated with impaired quality of life. The lack of such side-effects with ondansetron enables patients to carry out normal daily activities at home or work.

The cost effectiveness of 5-HT$_3$ receptor antagonists in clinical practice can only be fully evaluated from a broader perspective. Limiting the scope of evaluation to drug acquisition costs ignores the financial consequences of treatment failure and side-effects.

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