## This issue's topics



# No role for routine radiography

#### No role for routine radiography in neutropenic patients

In the absence of clinical signs of pneumonia or sinusitis, routine chest X-ray and sinus radiography should no longer be performed in ambulatory adult cancer patients presenting with febrile neutropenia in the outpatient setting. This is the conclusion of Oude Nijhuis and colleagues reporting in this issue. The chest X-ray provided additional information in only 2 of 109 febrile neutropenic episodes and in only 5 of 88 episodes did the sinus X-ray suggest sinusitis in asymptomatic patients. No change in the antibiotic therapy was deemed necessary in these patients. The more selective use of these investigations will lead to considerable cost-savings, they said.

## Squalene has selective cytoprotective activity in vitro

Squalene protected normal bone-marrow-derived cells from cisplatin-induced toxicity, but had no such effects in neuroblastoma cells, authors report in this issue. Most cytoprotective agents are too toxic and/or lack selective activity. Das and colleagues examined the protective effects of squalenean isoprenoid molecule with antioxidant properties- on the growth and amount of apoptosis occurring in bone marrow cells. They found a protective effect that was equipotent to glutathione-a known cytoprotective agent. The authors propose that in vivo studies of this cytoprotective effect are warranted.

#### Genetic polymorphisms and the ER-positive breast cancer risk

 $CYP19 \; (TTTA)_{7(-3bp)}$  allele carriers have a significantly increased risk of ER-positive, but not ER-negative, breast cancers, Miyoshi and colleagues report in this issue. In a case-control study (257 breast cancer patients and 191 controls), they examined genetic polymorphisms in genes involved in oestrogen biosynthesis (CYP19) and metabolism (CYP1A1) to try to distinguish polymorphic risk factors for ER-positive cancers. The combination of CYP19  $(TTTA)_{7(-3bp)}$  and CYP1A1 6235C/T polymorphisms was even more predictive than the CYP19 polymorphism alone. As the P-1 chemoprevention trial demonstrated that tamoxifen reduced the risk of ER-positive, but not ER-negative, breast cancers, identifying the ER-positive risk is likely to be clinically important allowing the appropriate selection of candidates for future chemopreventive trials, they said.

## Forthcoming papers

### Special Issue on "Care of the Adolescent with Cancer"

#### Introduction

Adolescent Oncology

M.P. Michelagnoli, J. Pritchard, M. Phillips.

### Original papers

Where should teenagers with cancer be treated?

J. Whelan

Who should be treating adolescents and young adults with acute lymphoblastic leukaemia?

S. Jeha

The management of cancer in the older adolescent

K. Albritton, W.A. Bleyer

Cancer survival in European adolescents and young adults

G. Gatta, R. Capocaccia, R. De Angelis et al.

Trends in cancer mortality at age 15 to 24 years in Europe

F. Levi, F. Lucchini, E. Negri, C. La Vecchia

Incidence of malignant disease by morphological type, in young persons aged 12-24 years in England, 1979-1997

J.M. Birch, R.D. Alston, M. Quinn, A.M. Kelsey

Breast cancer in adolescents and young women

C. Shannon, I.E. Smith

Brain tumours in adolescents

M. Capra, D. Hargrave, U. Bartels et al.

Melanoma in children and adolescents

A.S. Pappo

0959-8049/\$ - see front matter doi:10.1016/j.ejca.2003.09.020

Palliative care in adolescents R. George, S. Hutton

Douglas House—a 'respice' for young people F. Dominica

Fatigue in adolescents with and following a cancer diagnosis: developing the evidence base for practice J.L. Edwards, F. Gibson, A. Richardson *et al.*Teenage perspective

S. Geehan

Bridging the gaps: transition for young people with cancer

R. Viner

The Teenage Cancer Trust—advocating a model for teenage cancer services M. Whiteson

Postscript A.W. Craft