

*Inside this issue*

# New year, new hopes

Lee S. Schwartzberg, MD, FACP, Editor-in-Chief | The West Clinic, Memphis, TN

There is no doubt that advances in therapeutics over the past few years have altered our expectations about cancer treatment. The prototype of this new wave of drugs is imatinib (Gleevec), a rationally designed agent exploiting the deep understanding of the *BCR-ABL* fusion gene and its role in chronic myelogenous leukemia (CML). Reports from the 2006 American Society of Hematology meeting confirmed the remarkable sustained effect of imatinib. About 89% of chronic-phase CML patients who started using imatinib more than 5 years ago as part of the International Randomized Study of Interferon vs STI571 trial remain alive.

What about the minority who are imatinib resistant, become refractory, or cannot tolerate it? Understanding the fundamental biology of CML has led to two new agents being developed for this disease: dasatinib (Sprycel) and nilotinib (AMN107). In this month's Community Translations column beginning on page 11, current data on both of these ABL tyrosine kinase inhibitors are reviewed in detail. On page 14, Dr. William Fintel then places the three drugs in perspective for the generalist community oncologist, reflecting on multiple active drugs now available to treat a disease with fewer than 5,000 new cases per year.

Barbara Rogers, a nurse practitioner, reflects on the changing dynamics of care for these oral agents on page 16. Oncologists and their nursing staff must spend significant time, without reimbursement, to ensure patients take these drugs regularly, to report side effects, and to manage these effects appropriately. One wonders how the system will handle the oncoming wave of expensive oral agents poised to hit the marketplace.

Another recent advance is the burgeoning use of accelerated partial breast irradiation as an alternative to a prolonged course of external beam radiation therapy. On page 37, Dr. Jondavid Pollock reports on his institution's use of APBI in a group of patients with higher risk factors than those originally reported in the clinical trials. His results give a clear picture for clinicians selecting appropriate

candidates for this technique.

Dr. Aasim Sehbi and colleagues have written an extensive review for our Managing Side Effects section (see page 47) on an emerging problem: osteonecrosis of the jaw associated with bisphosphonate therapy. This report includes characteristic case histories, a review of the literature, and extensive management discussions. We've posted an extended version on our Web site, [www.CommunityOncology.net](http://www.CommunityOncology.net). You'll find Web exclusives and full text of previous issues of *Community Oncology*. It's a wonderful resource.

Speaking of excellent resources, please see the article by Dr. Henry Lynch and colleagues on page 22, where they describe their information service for educating families with hereditary cancer in a new, group-oriented approach. Dr. Lynch is one of the fathers of cancer genetic counseling and testing, so we are privileged to have his team write for us.

A special note: the second annual Community Oncology conference is fast approaching: it takes place in Washington, DC, on February 8th and 9th. Come interact with colleagues from across the country and capitalize on the opportunity to share solutions with others who work to deliver high-quality care in an efficient manner. It promises to be a highly stimulating and useful one for physicians, nurses, practice administrators, pharmacists, and other healthcare providers delivering cancer care.

With so much to look forward to, I regret having to end this letter on a sad note. Just weeks ago, Dr. Christopher Desch, a nationally prominent oncologist, tragically and prematurely lost his life. Chris was not only a consummate physician and outstanding leader promoting quality oncology care through his role as medical director of the National Comprehensive Cancer Network, he was a personal friend. Our thoughts and prayers go out to Chris's family and his many patients. He will be sorely missed.



Lee S. Schwartzberg, MD, FACP  
Editor-in-Chief

© 2007 Elsevier Inc. All rights reserved.