

Oncology: An Evidence-Based Approach

Chang AE, Ganz PA, Hayes DF, Kinsella TJ, Pass HI, Schiller JH, Stone RM, Strecher VJ, eds. Springer; 2006. 2005 pages, 113 chapters (multiple contributors). Hardcover, \$179.00 US.

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The appeal of evidence-based medicine (EBM) has been irresistible. In a remarkably short period of time, the notion that the practice of medicine should be transparent, based on explicit knowledge, and that claims of health intervention effects should be founded only on scientifically valid, empirical evidence has spread to all corners of the world and impacted not only medicine but also the thinking of laymen and policymakers. In 2001, the *New York Times Magazine* dubbed EBM one of the “Ideas of the Year” (*NY Times Magazine*. December 9, 2001:68-69). Almost every clinical discipline has seen attempts to summarize evidence-based management related to its prospective field. In oncology, I am aware of at least three such previous attempts.¹⁻³ The authors of this book have now joined the fray in a further attempt to synthesize and categorize the quality of our knowledge in cancer medicine. They have assembled a remarkable cadre of renowned authors with both methodological expertise in EBM and expertise in managing specific tumors (content-specific experts). The product is a remarkable encyclopedic text with 113 chapters in which the authors tried to close the circle from basic research to the practice of oncology. This logic was reflected in the organization of the book, which contains eight major sections: (1) Principles of Oncology, (2) Translational Basic Science, (3) Cancer Prevention and Control, (4) Cancer Imaging, (5) Solid Tumors, (6) Hematologic Malignancies, (7) Practice of Oncology, and (8) Cancer Survivorship.

In the preface, the authors state that “a key feature of this book is the evidence-based tables that collate the best evidence from the literature, enabling the reader to make decisions on the basis of data.” Indeed, to make informed decisions, these decisions have to be linked to evidence on benefits and harms as summarized in the evidence tables. These evidence tables (also known as evidence profiles or balance sheets) should be based not on selective citations but rather on the totality of the evidence. Therefore, any EBM text has to be judged against this criterion. How did this book fare when compared with the goal, which the authors themselves set out to achieve?

Unfortunately, with notable exceptions, this goal has not been accomplished. The evidence profiles summarizing data on benefits and harms along with the assessment of their quality are sorely missing from the text. Most chapters include a selective presenta-

tion of evidence on a single aspect of the management (typically survival) without addressing the issues of harms and the quality of our existing knowledge. Some chapters do not even include the evidence tables — a stated goal of this textbook!

Does this mean that this huge text consisting of more than 2,000 pages will prove useless to the practitioners who represent the target audience? On the contrary. When authors of this caliber set out to write a text like this, much potentially useful information will emerge. Some sections such as Principles of Oncology are quite remarkable and illustrate thoughtfulness of the authors in their approach to the practice of oncology. However, as discussed above, their goals and desires are not completely carried to fruition. This by no means indicates that the editors failed in their task. I believe it is time that we acknowledge why this seemingly simple but crucial goal of delivering “evidence-based tables that collate the best available evidence from the literature” has still not been fulfilled. Not everyone will like this answer, but my experience indicates that there is a gap between methodologic and content-specific experts. Content-specific experts (with notable exceptions) still have not embraced the principles of EBM to its fullest, and for the most part, they ignore the use of systematic reviews as the method of choice to provide the totality of evidence on a given topic. Admittedly, doing so is a time-consuming exercise that would require some protected time and funding, and it is much easier to resort to selective citations of data (that are not well reported to begin with) than to try to use a systematic approach in identifying, appraising, and synthesizing relevant research evidence. Until serious funding to publish such a textbook can be found, the goal of “evidence-based tables that collate the best available evidence from the literature” to link them to “1,000 most important decisions in oncology”⁴ will not be realized.

References

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2. Pinkerton R, Philip T, Fervers B, eds. *Evidence-Based Paediatric Oncology*. London: Blackwell BMJ Books; 2002.
3. Williams C, ed. *Evidence-Based Oncology*. London: Blackwell BMJ Books; 2003.
4. Vincent S, Djulbegovic B. Oncology treatment recommendations can be supported only by 1-2% of published high-quality evidence. *Cancer Treat Rev*. 2005;31:319-322.

An Atlas of Gynecologic Oncology: Investigation and Surgery

J. Richard Smith, Guiseppe Del Priore, John Curtin, John Monaghan, eds.
2nd ed. Taylor & Francis Group, LCC; 2005. 344 pages, 450 illustrations.
Hardcover, \$199.95 US.

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This textbook is an unusual mix of gynecologic oncologic surgical technique and various nonsurgical topics related to gynecologic oncology. This second edition includes 28 chapters, 5 of which are new. The new chapters include excellent presentations on ovarian tissue cryopreservation and transplantation techniques as well as sentinel lymph node mapping in gynecologic tumors. Most of the contributors are from the United Kingdom and the United States, but significant contributions came from France, Germany, Canada, and Hungary. The intended audience is practicing gynecologic oncologists, both experienced and in training.

The surgical atlas section of the text includes radical pelvic surgery, urologic procedures, and bowel procedures that a gynecologic oncologist should know how to perform. In addition, chapters are included on procedures such as radical vaginal hysterectomy, radical vaginal trachelectomy, and radical abdominal trachelectomy, which are not universally used by gynecologic oncologists but are on the cutting edge of gynecologic oncologic surgery. These topics are presented by authors who developed or popularized these techniques, including Marie Plante, Michel Roy, Lazlo Ungar, and the late Daniel Dargent. Another chapter by Farr Nezhat discusses laparoscopy as it relates to gynecologic cancer surgery, including radical hysterectomy, pelvic lymphadenectomy, and periaortic lymphadenectomy. This is a particularly informative chapter, and the illustrations are good. Another highlight of this section is a chapter on laterally extended endopelvic resection written by Michael Hockel, who developed the procedure. The artwork, illustrations, and photographs in the surgical atlas section of the text are generally clear and accurate. I believe that the chapters on cone biopsy and surgical management of trophoblastic disease do not contribute anything of significance for the reader.

The chapter on plastic reconstructive surgery is useful, but the description of the rectus abdominus flap is not clear, and too few illustrations are included. The chapter on debulking procedures in epithelial ovarian cancer is also good, although the techniques for mobilizing the liver and diaphragmatic resection are not discussed. The chapter on the management of vascular injuries is informative and practical in nature. The non-surgical topics in the book include tumor markers,

cross-sectional imaging, anatomy, assessment of surgical skill, pain management, palliative care, and doctor-patient communication. The chapter on anatomy is well illustrated and helpful with regard to the surgical atlas. The chapter on tumor markers is comprehensive and well written but seems to be out of place. The chapter on pain management is too brief to do justice to the topic. The chapters on palliative care and doctor-patient communication are interesting and provide a distinctly United Kingdom perspective on these topics.

In general, this text is a practical guide that addresses a range of operative and investigative procedures. It is informative and easy to read, and I recommend it as a worthwhile resource for any gynecologic oncologist.