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IN BRIEF

BREAST CANCER

Efficacy of taxane-based therapy persists at 10 years

Long-term results of the BCIRG 001 open-label, randomized phase III trial have confirmed that taxane-based adjuvant chemotherapy is the preferred treatment for women with node-positive breast cancer. The study randomly assigned 1,491 women with early stage node-positive disease to receive docetaxel, doxorubicin and cyclophosphamide (TAC) or 5-fluorouracil, doxorubicin and cyclophosphamide. Initial 5-year data had shown that TAC was beneficial, but the long-term risks and benefits were poorly understood. At 10 years follow up, disease-free survival and overall survival were significantly improved with TAC. However, a substantial number of women experienced a decrease in left ventricular ejection fraction, highlighting the fact that the toxic effects of anthracyclines have been underestimated and warrant careful investigation.

Original article Mackay, J. R. et al. Adjuvant docetaxel, doxorubicin, and cyclophosphamide in node-positive breast cancer: 10-year follow-up of the phase 3 randomised BCIRG 001 trial. Lancet Oncol. doi: 10.1016/S1470-2045(12)70525-9

EPIDEMIOLOGY

Increased cancer risk in World Trade Center Registry

Rescue and recovery workers exposed to debris and fumes following the 9/11 World Trade Center terrorist attack have an increased risk of different types of cancer, according to a study published in *JAMA*. The cancer incidence among 55,778 New York State residents in the World Trade Center Health Registry, including 21,850 rescue workers and 33,928 volunteers not involved with the rescue work, were compared. Among those enrolled in the Health Registry, there was an excess risk for prostate cancer, thyroid cancer, and multiple myeloma in 2007–2008 compared with that for New York State residents. However, given the relatively short follow-up period and lack of screening data, the increased incidence in these cancers should be interpreted with caution, as longer follow-up data are needed.

Original article Li, J. et al. Association between World Trade Center exposure and excess cancer risk. *JAMA* 308, 2479–2488 (2012)

GYNAECOLOGICAL CANCER

Risk reduction surgery in non-BRCA carriers—is less more?

Patients with ovarian cancer frequently present with advanced-stage disease; thus, it is important to identify accurately those at high risk and to offer risk reduction strategies. To this end, individuals thought to be at high risk are offered testing for *BRCA* mutations. Little is known about the risk-reduction strategies adopted by those who are found to be negative for these mutations. Now, a survey conducted in 1,477 women who underwent genetic counselling and *BRCA* testing has revealed that although women who are not found to have a *BRCA* mutation are less likely to undergo risk-reduction salpingo-oophorectomy than those with the mutation, there are still 12.3% who opt to have surgery. As this intervention is unproven in this population it seems that monitoring and further assessment is needed.

Original article Mannis, G. V. *et al.* Risk-reducing salpingo-oophorectomy and ovarian cancer screening in 1077 women after BRCA testing. *Arch. Intern. Med.* doi:10.1001/2013.jamainternmed.962