

tolerated; no increase in gastrointestinal toxicity was noted with the drug and no hematological toxicities were observed. Mild peripheral neurotoxicity (grade 1 or grade 2) was observed in some patients, but was usually reversible.

The authors conclude that addition of AK-2123 to standard radiotherapy is safe and increases local tumor control and survival in patients with advanced cervical cancer.

Original article Dobrowsky W *et al.* (2007) AK-2123 (Sanazol) as a radiation sensitizer in the treatment of stage III cervical cancer: results of an IAEA multicentre randomised trial. *Radiother Oncol* 82: 24–29

N ratio is prognostic in gastric cancer, even after limited lymph-node dissection

There is evidence to indicate that, in patients with gastric cancer, the ratio of metastatic to examined lymph nodes (N ratio) might be a better prognostic tool than the TNM staging system. An Italian group has investigated this issue in a retrospective review of 1,853 patients who had undergone radical resection for histologically confirmed gastric carcinoma. They concluded that inclusion of the N ratio might improve the prognostic power of existing staging systems, even in cases in which only limited lymph node dissection is performed.

When patients were grouped by N stage, there were significant differences in 5-year overall survival between patients who had >15 lymph nodes examined and those who had ≤15 nodes examined. The data indicated that examination of 15 or fewer nodes resulted in understaging of patients. By contrast, 5-year survival did not vary with number of nodes examined when patients were grouped by N-ratio category (N ratio 0, 0%; N ratio 1, 1–9%; N ratio 2, 10–25%; N ratio 3, >25%; all categories determined by best-cutoff approach). The N-ratio categories identified groups of patients with significantly different survival rates; groups determined by N ratio were more homogenous than those determined by TNM classification. N ratio, but not N stage, independently predicted survival in multivariate analysis, regardless of the extent of lymph node dissection.

Original article Marchet A *et al.* (2007) The ratio between metastatic and examined lymph nodes (N ratio) is an independent prognostic factor in gastric cancer regardless of the type of lymphadenectomy: results from an Italian multicentric study in 1853 patients. *Ann Surg* 245: 543–552

Computer-aided detection does not improve the accuracy of mammogram interpretation

Computer-aided detection—designed to assist in the interpretation of mammograms—was approved by the FDA in 1998. Since its approval, an increasing number of mammography facilities in the US have adopted this technology; however, few studies have examined the effect of computer-aided detection on the accuracy of mammogram interpretation. To address this issue, Fenton *et al.* examined the performance of 43 screening facilities in the US during 1998–2002. Complete data were available for 222,135 women (429,345 mammograms).

During the study period, seven centers implemented computer-aided detection. In these centers, diagnostic specificity fell from 90.2% before implementation to 87.2% after implementation ($P < 0.001$), and the positive predictive value decreased from 4.1% to 3.2% ($P = 0.01$). In addition, while the rate of biopsy increased significantly in those centers that implemented computer-aided detection ($P < 0.001$), the slight increases in sensitivity and cancer-detection rate were not significant ($P = 0.32$ and $P = 0.90$, respectively). When data from all 43 centers were analyzed, the accuracy of mammogram interpretation was found to be significantly lower in those centers using computer-aided detection than in those centers that had not implemented this technology ($P = 0.005$). The authors conclude that the increased rates of biopsy and recall associated with computer-aided detection might not translate into an improved detection of breast cancer. They suggest that larger studies are required to determine whether the clinical benefits of this technology outweigh the potential distress caused to women recalled unnecessarily.

Original article Fenton JJ *et al.* (2007) Influence of computer-aided detection on performance of screening mammography. *N Engl J Med* 356: 1399–1409

Gene expression profiling: correlation with response to bortezomib

Multiple myeloma has a variable clinical course, and existing prognostic tools cannot reliably identify those high-risk patients who could benefit most from novel therapies. The