

## In this issue

In this issue, there are five original articles and a literature review. In the first two articles, the authors examine the importance of effective communication between staff and staff with patients in the radiotherapy department. In the next two papers, researchers present their findings of retrospective studies on the evaluation of the therapeutic benefit of postoperative radiotherapy in head and neck cancer and in patients with T1–T2 breast tumours.

The last two papers are concerned with the evaluation of the best choice of radiation technique; the first is an original paper in which the authors explored to identify the most effective technique that best protects the head of femur, during three-dimensional conformal radiotherapy for prostate cancer. In the final paper, the authors present a literature review to compare plaque brachytherapy and proton therapy for the treatment of choroidal melanoma.

### **IMPORTANCE OF EFFECTIVE COMMUNICATION**

In the first paper, Halkett et al. present their findings on an investigation into the role of the radiation therapist in effective patient communication. The authors argue that previous research has explored patients' perspectives of the role of radiation therapists and radiation oncology nurses; however, this study is the first to observe these professional interactions and communications in a simulated setting. In this study, the authors explore how radiation therapists communicate with breast cancer patients during a radiotherapy planning appointment and how they provide information; they also explore the perspectives of radiation therapists on their role in providing patient information and support. This study highlights the import-

ant role the radiation therapist play in communicating with patients and providing information, particularly if the patient exhibit anxiety and distress.

In the second paper, Armoogum and Buchgeister highlight and explore the factors affecting knowledge sharing in the radiation physics team and in working with other professionals. The authors put forward the concept of the radiotherapy physics team as a community of practice and discuss how this community allows physicists to create, share and manage knowledge. The authors highlight the challenges faced by medical physicists/clinical scientists as their role demands to keep developing their skills and knowledge to deal with the impact of the ongoing introduction of new technology, new techniques and increasing innovation.

### **THERAPEUTIC BENEFIT OF RADIOTHERAPY**

In the next paper, Ampil et al. discuss the role and value of postoperative radiotherapy in individuals with carcinoma of the upper aerodigestive tract who present with limited metastatic nodal spread. In this study, the authors undertake a retrospective detailed review of 37 individuals presenting with confirmed metastatic disease in a single neck node who had undergone postoperative radiotherapy. Although the authors acknowledge that their study had limitations, their results demonstrate that the precise role of postoperative radiotherapy in people with head and neck cancer and documented metastasis in a single node remains to be defined including the identification of select individuals who may truly benefit from combined therapy.

In the fourth paper, Yadav et al. evaluate the therapeutic benefit of radiotherapy after surgery in patients with T1–T2 breast tumour. The authors undertake a large scale retrospective study on 915 patients who underwent mastectomy or conservative breast surgery with or without radiotherapy. The authors present their findings at a median follow-up of 74 months and give disease-free survival rates; in their data, they use a number of univariate and multivariate analysis factors to produce a good discussion on treatment outcomes, they conclude that postoperative radiotherapy was found to give a good therapeutic advantage to all patients with T1–T2 breast cancer.

### **TREATMENT OF CHOICE**

In their paper, Karacetin et al. highlight the increase use of three-dimensional conformal radiotherapy in the treatment of prostate cancer. The aim of their study was to identify the most effective technique that best protects the vital structures such as bladder, rectum, and in particular, the head of femur. The authors compare the femur head doses resulting from co-planar beam arrangements in four-field, five-field, six-field and seven-field treatment plans, in a dose-escalated conformal radiotherapy schedule. After undertaking detailed statistical evaluation using planning data for 22 patients, the authors

found that the greatest femoral head sparing was achieved by the four-field techniques.

In the last paper, Appleton and Bridge undertake a literature review to compare the use of plaque brachytherapy and proton therapy for the treatment of choroidal melanoma. The authors are concerned with the importance of the role of conservative treatment in patients with ocular melanomas, to enhance global retention, good visual acuity and local control. The authors use the literature to explore two well established radiation conservative treatment options—proton beam radiotherapy and episcleral plaque brachytherapy. The purpose of the review was to establish whether there is a significant clinical difference in normal tissue morbidity and local tumour control between these two treatment options, and whether this difference can justify the purchase and implementation of additional proton therapy facilities. Based on this review, the evidence suggests that both treatment options are comparable and that neither is clinically superior to the other regarding normal tissue morbidity and local tumour control. The review highlighted the need for further research on a larger scale in order to bridge the gap that is apparent within the literature.

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