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**Breast Cancer
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Article under discussion:

Presence of apoptotic and nonapoptotic disseminated tumor cells reflects the response to neoadjuvant systemic therapy in breast cancer

Tanja Fehm , Sven Becker, Graziella Becker-Pergola, Karl Sotlar, Gerhard Gebauer, Silke Dürr-Störzer, Hans Neubauer, Diethelm Wallwiener and Erich-Franz Solomayer

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Release of tumor cells during neoadjuvant therapy

Katharina Pachmann (01 November 2006) Friedrich Schiller University of Jena, Germany 

The present report by Dr. Fehm confirms our previous results about dissemination of tumor cells during the course of neoadjuvant therapy presented already at the 2004 San Antonio Breast cancer symposium (Pachmann K., Camara O., Pachmann UA. Influence of primary tumor chemotherapy in breast cancer on circulating tumor cells. Indications for massive cell release into circulations concurrent with tumor size reduction. (2004) *Breast Cancer Research and Treatment* 88: S224), which was commented in several publications: "An article in the May 2005 issue of *Oncology News International* (Vol. 14, No. 5) reports that neoadjuvant chemotherapy* may cause the release of cancer cells into the blood. Katharina Pachmann, MD, of Friedrich-Schiller University in Germany said that "ironically, paclitaxel produces the greatest degree of tumor shrinkage but also the greatest release of circulating tumor cells." The cells remained in the circulation for at least 5 months after subsequent surgery. Dr. Pachmann said that this observation corresponds with results found in patients, that is, tumor response does not mean increased survival". In accordance with our results Dr. Fehm shows that after neoadjuvant therapy disseminated cells are found at a higher frequency than before. We would like to emphasize in addition, that most of these cells are not apoptotic but even of these non-apoptotic cells not all are necessarily metastatic cells. Rather, a minimal fraction of them (perhaps less than 0.01% as shown by the group of Dr. Chambers) is expected to form metastases, but release of such cells is the first step and should be avoided or the released cells be destroyed by additional chemotherapy after surgery, as suggested by us.


With best regards

Katharina Pachmann

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Competing interests

None declared

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