Letters

A better understanding of how to predict and monitor tumor and normal tissue response to radiation in real time is keenly needed. For example, genomic approaches, such as circulating tumor DNA measurements\(^3\) or a genome-based model for adjusting radiotherapy dose, may be useful to tailor radiotherapy dose according to tumor radiosensitivity\(^4\) and should be tested in prospective clinical trials.

Ironically, with the wide use of spatially accurate radiation techniques, such as intensity-modulated radiotherapy and/or image-guided radiotherapy, interobserver variabilities in the contouring of clinical target volumes (CTVs) can be a major factor contributing to radiation inaccuracy, which can influence clinical outcomes.\(^5\) Therefore, experts have developed consensus guidelines to help with CTV delineation in challenging tumors such as head and neck cancers, including nasopharyngeal carcinoma.\(^6\) These guidelines are an important educational endeavor to reduce undesirable variations in clinical practice. In addition to these guidelines, clinical trials are needed to optimize the CTVs for certain tumor sites and stages. Therefore, our group is conducting 2 randomized phase-3 trials to determine whether we can safely spare the lower neck nodes (NCT02642107) in the clinically uninvolved neck and the medial retropharyngeal nodes (NCT03346109) in patients with nasopharyngeal carcinoma. If successful, these studies will help to reduce toxic effects in these patients. In summary, we believe that radiation approaches and trials need to be revolutionized to avoid being marginalized in the precision-medicine era.

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CORRECTION

Incorrect Surnames in Byline: In the article titled “Erythematous Velvety Plaque of the Scrotum and Penis,” the surnames of 2 authors who appear in the byline have been tagged for correct display. Kae Jack Tay now displays as Tay KJ, and Valerie Huei Li Gan now displays as Gan VHL. The article was corrected online.


Error in Figure 1: In the Original Investigation titled “Fatal Toxic Effects Associated With Immune Checkpoint Inhibitors: A Systematic Review and Meta-analysis,” published online September 3, 2018, there was an error in Figure 1C. The fatality rate percentage for adrenal fatalities was not correctly presented. This article was corrected online.


Error in Figure 2: In the Brief Report titled “Safety and Efficacy of Bevacizumab Plus Standard-of-Care Treatment Beyond Disease Progression in Patients With Advanced Non-Small Cell Lung Cancer: The AvaALL Randomized Clinical Trial,” published online August 30, 2018, there was an error in Figure 2. The text and the overall survival data were correct, but the Kaplan-Meier curves and median values were incorrect. This article was corrected online.