Taxane use in breast cancer and risk of brain metastases

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To The Editor,

I wish to congratulate Amelot for their article [1] in which they assessed the effect of primary tumor systemic chemotherapy treatment on brain metastases localization. A total of 413 patients who underwent treatment for brain metastasis were included. The identification of all previous anticancer drugs received by patients from primary tumor diagnosis to brain metastases diagnosis was collated. They identified that the only independent factors associated with short brain metastasis-free survival (bMFS) were lung primary tumor and mitotic spindle inhibitor (taxanes) chemotherapy. However, among primary tumors, only patients with non-small cell cancers and breast cancer patients received taxanes. Concentrating breast cancer patients only, breast cancer patients commonly receive adjuvant taxanes for higher-risk patients (lymph node-positive patients) except patients with HER-2-positive disease. In other words, if breast cancer patients received taxanes, it means those have worse

prognosis and have more chance to develop brain metastasis. This issue should be revised in the current study as well.

Compliance with ethical standards

Conflict of interest The author declares no conflict of interest.

Human and animal rights This paper did not involve human participants and/or animals.

Informed consent Not applicable.

Reference

1. Amelot A, Terrier LM, Mathon B, Cook AR, Mazon JJ, Valery CA, Cornu P, Leveque M, Carpentier A. Can anticancer chemotherapy promote the progression of brain metastases? *Med Oncol*. 2018;35(3):35. <https://doi.org/10.1007/s12032-018-1097-4>.

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