

Comment on 'Phase III randomised controlled trial of neoadjuvant chemotherapy plus radical surgery vs radical surgery alone for stages IB2, IIA2, and IIB cervical cancer: a Japan Clinical Oncology Group trial (JCOG 0102)'

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Sir,

In *British Journal of Cancer*, volume 108, Katsumata *et al* (2013) reported negative results of randomised controlled trial (RCT) of neoadjuvant chemotherapy (NACT) for IB2, IIA2, and IIB cervical cancer. They concluded that NACT did not improve overall survival, but reduced the number of patients who received postoperative radiotherapy. However, this comment seems to be a little bizarre. If they really wanted to determine whether NACT before radical surgery improves overall survival, they should not change the other factors, including postoperative therapy between both NACT and control groups, because their study was a superiority trial, not a non-inferiority one. Indeed, therapeutic role of NACT for cervical cancer and its possibility to reduce postoperative adjuvant therapy are quite distinct matters.

If adjuvant radiotherapy had been given equally to all of the cases regardless of the surgical findings, like the study by Sardi *et al* (1997), the results might have been different.

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