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Treatment regimen design in clinical radiotherapy for hepatoma

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TO THE EDITOR

Recently, the paper by Wang *et al*[1] published in *World Journal of Gastroenterology* has given rise to great interest of many researchers. It is well known that hepatoma is one of the lethal diseases with a high incidence in the world, especially in Asia. Radiotherapy is the main treatment modality of hepatoma in clinical practice. Unfortunately, intrinsic radiosensitivity of cancer cells is not fully understood, though a large number of papers on it are now available. Yang and colleagues[2] have developed the premature chromosome condensation technique for clinical radiotherapy of hepatoma. A precise and quick measurement of cell radiosensitivity can detect the high-risk results after exposure to a large dose.

Premature chromosome condensation technique can quickly and precisely detect radiation-induced chromosome damage[3-5]. Chromatid breaks are regarded as a good radiodosimetry, which highly correlates with cell survival and radiosensitivity[6]. However, they are not a negative value as described by Wang *et al*[1]. I recommend her to further measure them in order to perfect this promising approach.

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