

THE JOURNAL

The Red Journal's Top Downloads of 2019

Anthony L. Zietman, MD, FASTRO



Editor-in-Chief

Every year we take a look at the papers published in the Red Journal over the preceding 12 months and see which were the most downloaded articles. This, we believe, gives us a snapshot of the immediate concerns, interests, and needs of our readers who are, in the main practicing radiation oncologists and physicists around the world. These papers differ somewhat from those that are most heavily cited. The latter are more weighted toward basic science and clinical trials. The downloads reflect the pragmatic

needs of those in practice, and their desire to come quickly up to speed on emerging treatments and technologies.

Table 1 shows the top 20 downloaded papers and it is certainly worth taking a look at how they group. The big unresolved issue of the day, the management of oligometastatic cancer, is very well represented through data from the SABR-COMET Trial, an analysis of the Johns Hopkins oligometastatic prostate cancer study, and an editorial discussion of the British STAMPEDE Trial. In addition,

Table 1 Top downloads of 2019.

Rank	Publication	Year	Lead Author	Article Title
1	2018		Palma DA ¹	Stereotactic Ablative Radiation Therapy for the Comprehensive Treatment of Oligometastatic Tumors (SABR-COMET): Results of a Randomized Trial
2	2018		Wong JYC ²	Total Body Irradiation: Guidelines from the International Lymphoma Radiation Oncology Group (ILROG)
3	2018		Tsang RW ³	Radiation Therapy for Solitary Plasmacytoma and Multiple Myeloma: Guidelines From the International Lymphoma Radiation Oncology Group
4	2019		Bakst RL ⁴	Perineural Invasion and Perineural Tumor Spread in Head and Neck Cancer
5	2019		Choudhury A ⁵	STAMPEDE: Is Radiation Therapy to the Primary a New Standard of Care in Men with Metastatic Prostate Cancer?
6	2019		Kavanagh B ⁶	Radiation Oncology APM: Why Us? Why Now?
7	2019		Deek MP ⁷	Radiation Therapy in the Definitive Management of Oligometastatic Prostate Cancer: The Johns Hopkins Experience
8	2019		Jackson WC ⁸	Stereotactic Body Radiation Therapy for Localized Prostate Cancer: A Systematic Review and Meta-Analysis of Over 6,000 Patients Treated On Prospective Studies
9	2018		Pinnix CC ⁹	Radiation in Central Nervous System Leukemia: Guidelines From the International Lymphoma Radiation Oncology Group
10	2010		Kirkpatrick JP ¹⁰	Radiation Dose–Volume Effects in the Spinal Cord
11	2010		Bentzen SM ¹¹	Quantitative Analyses of Normal Tissue Effects in the Clinic (QUANTEC): An Introduction to the Scientific Issues
12	2015		Yahalom J ¹²	Modern Radiation Therapy for Extranodal Lymphomas: Field and Dose Guidelines From the International Lymphoma Radiation Oncology Group

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Table 1 (continued)

Rank	Publication Year	Lead Author	Article Title
13	2009	Hall WH ¹³	Development and Validation of a Standardized Method for Contouring the Brachial Plexus: Preliminary Dosimetric Analysis Among Patients Treated With IMRT for Head-and-Neck Cancer
14	2019	Lee WR ¹⁴	A Call for Change in the ABR Initial Certification Examination in Radiation Oncology
15	2019	Bergom C ¹⁵	The Implications of Genetic Testing on Radiation Therapy Decisions: A Guide for Radiation Oncologists
16	2010	Marks LB ¹⁶	Use of Normal Tissue Complication Probability Models in the Clinic
17	2018	Toesca DAS ¹⁷	Management of Borderline Resectable Pancreatic Cancer
18	2019	Sahgal A ¹⁸	Spinal Cord Dose Tolerance to Stereotactic Body Radiation Therapy
19	2017	Tas B ¹⁹	Conformity Index, Gradient Index, Heterogeneity Index, and Size of Metastasis Correlations for LINAC-Based Stereotactic Radiosurgery/Radiation Therapy
20	2019	Nguyen TK ²⁰	Single-Fraction Stereotactic Radiosurgery Versus Hippocampal-Avoidance Whole Brain Radiation Therapy for Patients With 10 to 30 Brain Metastases: A Dosimetric Analysis

defining the role, and sharpening the technique, of both SRS and SBRT is also paramount. These modalities are used both for primary therapy and for the management of metastases, and thus feature right across our practice. There are papers on prostate SBRT as well as CNS therapy and spinal cord dose guidelines. One study, comparing SRS with whole brain plus hippocampal sparing in patients with 10-30 brain metastases, shows how far we have come in recent years from the somewhat dismissive, low-tech, palliative treatments of the past.

Guidelines remain important and, as in recent years, the ILROG group have masterfully summarized the best way to treat the diseases that come under their aegis. Having dealt with the common presentations of Hodgkin and Non-Hodgkin lymphoma in previous years they now address myeloma, total body irradiation, CNS leukemia, and extranodal lymphomas. Because these are rare presentations in radiation oncology clinics, their experience is limited, and the value of these documents immense. A separate guideline for brachial plexus contouring is equally popular.

There are several “classic” papers that have featured in this list for several years. These include two of the QUANTEC papers from 2010. In the coming year we will see the HyTECH papers emerge. These will define safe parameters for SBRT and SRS and will almost certainly feature very highly next year.

And finally, some surprise entrants. These cover the hot political issues of reimbursement and professional certification, and thus probably should be no surprise at all. One paper addresses the Radiation Oncology Alternative Payment Model and a second examines the merits, or otherwise, of the American Board of Radiology’s certification exam.

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