

Trastuzumab: possible publication bias

Metcalfe et al ¹ wrote ‘there is a duty of care to trial participants to promptly publish outcomes in all exposure groups.’ Perez and Suman ², principal investigators of the trial in question N9831 ³, defend withholding the sequential trastuzumab data from peer review by citing protocol and NCI policy. These data are of particular importance as the unpublished evidence available from this trial suggests that sequential therapy may be less effective than the published evidence now indicates ¹. The grounds cited ² for refusing to publish are insufficient. The ‘maturity’ of these data is arbitrary and probably irrelevant, as since the HERA trial’s first interim publication⁴ the maturity in the N9831 data are subsumed by potential meta-analyses of combined trial data.

For most EU countries the recommendation is for sequential treatment, which is not so in the US. Available data indicate that N9831’s full dissemination might change clinical consensus on optimum treatment of HER2 +ve breast cancer, regarding the choice between concurrent and sequential treatment and the risk benefit profile of sequential treatment.

Regulators, patients and clinicians rely on randomised comparisons of treatment and need therefore to access all these data. It is not ethical to continue to withhold such information – especially since most of the N9831 study is already published – pending an arbitrary decision of a data monitoring committee. The investigators certainly need to submit analyses, now 8 years on, of the only direct comparison of sequential versus concurrent treatment, to properly inform treatment and trial protocols.

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¹ Metcalfe S, Burgess C, Laking G, et al. Trastuzumab: possible publication bias. *Lancet* 2008;371:1646-48.

² Perez EA, Suman VJ. Lack of publication bias related to results from trastuzumab study. *Lancet* 2008;372:626-7.

³ Romond EH, Perez EA, Bryant J, et al. Trastuzumab plus adjuvant chemotherapy for operable HER2-positive breast cancer. *N Engl J Med* 2005;353:1659-72.

⁴ Piccart-Gebhart MJ, Procter M, Leyland-Jones B, et al, for the Herceptin Adjuvant (HERA) Trial Study Team. Trastuzumab after adjuvant chemotherapy in HER2-positive breast cancer. *N Engl J Med* 2005;353:1659-72.