



Response to: What is the optimal management of dysphagia in metastatic esophageal cancer?

Response by Hanna and Ferri

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We appreciate the comments and elegant statistical analysis by Dr. Cavallin and others, but we believe that they miss the forest for the trees. Our manuscript—being a retrospective review of our experience managing this complex patient population, captured in a prospective database—clearly has several statistical limitations common to studies of this type and is by no means a definitive comment on the treatment of patients with metastatic esophageal

cancer. Rather, as we mentioned in the Discussion, it is to be used as hypothesis-generating fodder for a prospective randomized trial examining stenting with or without brachytherapy—an investigation that we are currently undertaking (search for NCT01366833 at <http://clinicaltrials.gov/>).

Wael C. Hanna MD MBA
Lorenzo E. Ferri MD PhD*
Division of Thoracic Surgery
McGill University and The Montreal
General Hospital
Montreal, Quebec
* lorenzo.ferri@mcgill.ca