

Book review: *Therapeutic Revolution: The History of Medical Oncology From Early Days to the Creation of the Subspecialty*

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Therapeutic Revolution: The History of Medical Oncology From Early Days to the Creation of the Subspecialty

by Pierre R. Band MD

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[I]f you didn't know history, you didn't know anything. You were a leaf that didn't know it was part of a tree.

— Michael Crichton, *Timeline*

Intended for those of us who work either directly or peripherally with people diagnosed with cancer, Dr. Pierre R. Band's book *Therapeutic Revolution: The History of Medical Oncology from Early Days to the Creation of the Subspecialty* laudably depicts the roots of this multidimensional specialty and of its numerous branches, including a breadth of oncologic subspecialties and palliative care.

Band, a Paris-born medical oncologist and researcher who has trained and worked extensively throughout Canada, chronicles the remarkable development of the specialty from Sidney Farber's use of aminopterin in acute lymphocytic leukemia in 1948 to the official creation of medical oncology as a specialty in 1973. The book is part medical reference, part historical text, and part personal narrative.

As a young child at the beginning of World War II, Band recalls being given a gas mask to protect against mustard gas attacks, and he uses that memory as he interweaves the subsequent clinical investigations of nitrogen mustard on lymphomas and chronic lymphocytic leukemia. What follows is a skilfully constructed presentation of the successes and failures of trials and investigations of compounds, agents, and protocols, as well as profiles of some of the better and lesser-known innovators of cancer treatments.

In particular, Band, who used tamoxifen in the first patient to receive that treatment in North America, pays special attention to the case of breast cancer, which was

initially considered poorly responsive to chemotherapy, but was one of the first malignancies to be successfully treated with adjuvant and combination chemotherapy. That success would set the stage for combination chemotherapy in other cancers such as epithelial ovarian cancer, small-cell lung cancer, and osteogenic sarcoma.

Recognizing the "branches and leaves," Band quite appropriately pays tribute to Dame Cicely Saunders, Dr. Balfour Mount, and Dr. Jimmie C. Holland, whose contributions were responsible for the development and maturation of the fields of palliative care and psycho-oncology, both of which arguably grew out of an oncologic base.

Where Band falls slightly short is in the patient narrative. Though the book is dedicated to "the pioneers of medical oncology and the patients who made it possible," the personal stories of the individuals suffering the stigma of a cancer diagnosis in the early days and undergoing at times crude and rudimentary treatments feels somewhat unduly anonymized and overshadowed by Band's often academic tone and approach. There is, however, an inadvertent acknowledgment of the humanistic side of oncology, with the inclusion of a broad range of malignancies, both pediatric and adult, that demonstrate a focus on the whole patient instead of a particular system, as many medical specialties do.

Band concludes by highlighting trends in cancer mortality rates and espousing the importance of prevention and screening for premalignant lesions. The epilogue "Medical Oncology: An Extraordinary Odyssey" is short—and perhaps with good reason. *Therapeutic Revolution* gives us occasion to look at the remarkable achievements in medical oncology since the beginning of the last century, but also serves as a reminder of how much we have yet to accomplish.

CONFLICT OF INTEREST DISCLOSURES

I have read and understood *Current Oncology's* policy on disclosing conflicts of interest, and I declare that I have none.

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