



Letter to the Editor: Granulocyte-Macrophage Colony Stimulating Factor (Gm-Csf) In Malignancy

Şinasi Özsoylu

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GRANULOCYTE-MACROPHAGE COLONY STIMULATING FACTOR (GM-CSF) IN MALIGNANCY

Şinasi Özsoylu, MD □ Fatih University Medical Faculty, Emek-Ankara, Turkey

I have read the paper of van Pelt et al. entitled "Granulocyte-Macrophage Colony-Stimulating Factor (GM-CSF) Ameliorates Chemotherapy-Induced Neutropenia in Children With Solid Tumors" in *Pediatr Hematol Oncol.* 1997; 14:539–545. The authors stated, "A larger randomized trial would be needed to draw conclusions about the effect of GM-CSF on prevention of febrile neutropenia in childhood malignancies," despite the fact that neither their work nor previous related studies (their References 4–7) give any reason for this suggestion. Treatment of malignancies is already highly expensive. Therefore, we should look for more economical approaches rather than to add another burden to the budget of our patients. Actually, the authors, without giving nominal granulocyte count changes, tabulated statistical values that do not give the reader an opportunity for better evaluation. I believe we should treat not laboratory values or statistical evaluations, but the problems of our patients as economically as possible. Granulocytopenias (as well as leukopenias) could be prevented or treated by megadose methylprednisolone administration without adding an extra cost to care management [1, 2].

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Address correspondence to Şinasi Özsoylu, MD, Fatih University Medical Faculty Çiftlik Cad. No: 57, 06510, Emek-Ankara, Turkey.