



# The role of PET CT in the management of advanced nodal head neck cancer post chemoradiotherapy

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We would like to thank the authors for their balanced and informative editorial on our PET NECK study (1).

In response to their points on study design, we did not undertake collection and reporting of the data on patients with histological evidence of tumour in the post-chemoradiotherapy neck dissections mainly because there is no way of reliably identifying whether residual disease identified on histology is viable cancer (2). This can result in an over-estimation of the proportion of patients with viable tumour. With no reliable way of differentiating patients with and without viable tumour, the data becomes of little clinical significance.

We agree that a pre-operative CT scan to identify the characteristics of those who do not respond to chemoradiotherapy is an interesting question. However, it was not one that we set out to answer, and hence it was not included. At the time of study inception, there were difficulties in standardising standardised uptake values (SUV) between different systems and centres (3), and therefore would not have been possible to deliver in a multicentre setting.

Sincerely,

Wai Lup Wong, Hisham Mehanna, Janet Dunn

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## Footnote

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*Conflicts of Interest:* All authors have completed the ICMJE uniform disclosure form (available at <http://dx.doi.org/10.21037/tcr.2016.10.89>).

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*Ethical Statement:* The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.

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