



Oncology bulletin

January 2026

The aim of this current awareness bulletin is to provide a digest of recent guidelines, reports, research and best practice on Oncology

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Cancer Treatments

Original research

Systematic review on the efficacy of dexrazoxane in managing extravasation of anthracyclines

Introduction - Extravasation of anthracyclines is an uncommon but serious complication of systemic anticancer therapy (SACT), potentially causing significant tissue injury, treatment delays and psychological distress. Dexrazoxane is the only licensed pharmacological antidote for anthracycline extravasation; however, its real-world use, dosing adherence and clinical outcomes remain poorly characterised. This systematic review evaluates the clinical efficacy of dexrazoxane, assesses variations in its administration, summarises additional management strategies and describes reported patient outcomes.

Annette (Netty) Cracknell et al

BMJ Connections Oncology 3 e000075 (open access)

Diagnosis

Suspected cancer: recognition and referral

NICE Guidance NG 12

General

Editorial (see next item for the research)

Preservatives and risk of cancer - Potential carcinogenic effects of preservative food additives require further validation

Xinyu Wang et al

BMJ 392 (8479) r2613



Research

Intake of food additive preservatives and incidence of cancer: results from the NutriNet-Santé prospective cohort

Anaïs Hasenböhler et al

BMJ 392 e084917 (open access)

Specific Cancers

Venetoclax with obinutuzumab for untreated chronic lymphocytic leukaemia

NICE Guidance TA 1119

Avelumab with axitinib for untreated advanced renal cell carcinoma

NICE Guidance TA 1120

Research

Effect of adjuvant carboplatin intensified chemotherapy versus standard chemotherapy on survival in women with high risk, early stage, triple negative breast cancer (CITRINE): randomised, open label phase 3 trial

Objective - To evaluate the efficacy and safety of epirubicin and cyclophosphamide followed by weekly paclitaxel with or without carboplatin as adjuvant therapy for patients with high risk, early stage, triple negative breast cancer.

Yin Liu et al

BMJ 392 (8479) e085457 (open access)

Survivorship

Original Research

External validation of the PROgnostic Model for Advanced Cancer for 90-day, 6-month and 1-year mortality in geriatric oncology

Prognostication is an important aspect of cancer care, particularly for older adults who often prioritise quality of life over longevity. Currently, there are few useful prognostic tools for predicting 6-month and 1-year mortality to guide hospice enrolment and interventions in geriatric oncology. Most existing models focus on short-term prognosis (days to weeks) or were developed for patients receiving active treatment, limiting their applicability for hospice eligibility assessment. This study aimed to validate the predictive performance of the PROgnostic Model for Advanced Cancer (PRO-MAC) for 90-day, 6-month and 1-year mortality in older outpatients with cancer.

Wen Yang Goh et al

BMJ Connections Oncology 3 000045 (open access)



Review

Impact of immunotherapy and small molecule cancer therapy on fertility: a narrative review of current evidence, mechanisms and future directions

With increasing cancer incidence among individuals of reproductive age, preserving fertility has become a critical aspect of cancer care. This narrative review explores the impact of contemporary cancer therapies, including immunotherapies and targeted agents, on reproductive health, highlighting clinical fertility outcomes and underlying biological mechanisms. We outline the epidemiology and treatment strategies for malignancies common in adolescents and young adults (AYAs), including breast, melanoma, lung, gynaecologic, colorectal cancers and haematologic malignancies. Basic reproductive physiology in males and females is reviewed, including the hypothalamic–pituitary–gonadal axis, ovarian follicle and oocyte development, and spermatogenesis.

Emma Gargus et al

BMJ Oncology 5 e000843 (open access)

Original research

Global determinants of cervical cancer outcomes: a health systems analysis

Objective - Significant global health disparities persist in cervical cancer, with over 85% of cases and deaths occurring in low- and middle-income countries (LMICs). In many settings, access to screening, vaccination and treatment is limited.

Despite cervical cancer being largely preventable through human papillomavirus (HPV) vaccination and early detection, many women around the world face inadequate healthcare infrastructure, lack of awareness, cultural stigma and gender barriers to seeking care. Therefore, we evaluated global health system metrics that may inform efforts to improve equity in access to cervical cancer care globally.

Adrian Eleazar Go et al

BMJ Oncology 5 e000975 (open access)