



Oncology bulletin

September 2025

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

If you would like to request any of the articles included in this bulletin, or be put onto the distribution list, please contact: ulth.library.grantham@nhs.net

For more information on Library and Knowledge Services please go to:
www.nhslincslibrary.uk

Diagnosis

Original research

How and under which circumstances does a rapid diagnostic pathway for prostate cancer work to reduce anxiety for patients? A realist evaluation based on patient, caregiver and staff perspectives

Referral to a cancer diagnostic pathway is a stressful life event, yet distress may be exacerbated by long waiting times, miscommunications or other avoidable challenges. A model prostate cancer (PCa) rapid diagnostic pathway (RDP) called Prostad has been developed and trialled to reduce the time between referral or diagnosis. This realist evaluation asks how, for whom and under which circumstances this model RDP may reduce anxiety for patients.

Katie Jones et al

BMJ Connections Oncology 2 e000031 (open access)

Editorial (see next item for article)

Participation in early mammography screening

Enduring benefits at a population level

Zhen-qiang Ma

BMJ 390 (8472) r1893

Research

First mammography screening participation and breast cancer incidence and mortality in the subsequent 25 years: population based cohort study

Objective - To determine whether women who did not attend their first mammography screening invitation have a long term risk of poor screening adherence and breast cancer outcomes.

Ziyan Ma et al

BMJ 390 (8472) e085029 (open access)



General

Expectations, experiences and effects for couples participating in a digital sexual rehabilitation programme after radical prostatectomy: a feasibility study in Sweden

Introduction Prostate cancer treatment commonly affects sexual function. However, how effective rehabilitation programmes should be constructed is yet to be determined. The aim of this study was to describe the expectations experiences and preliminary effects of a digital sexual rehabilitation programme among couples after radical prostatectomy and to determine its feasibility.

Samuel Ask et al

BMJ Connections Oncology. 2 e000010 (open access)

Concordance with CONSORT-AI guidelines in reporting of randomised controlled trials investigating artificial intelligence in oncology: a systematic review

Background The advent of artificial intelligence (AI) tools in oncology to support clinical decision-making, Reduce physician workload and automate workflow inefficiencies yields both great promise and caution. To generate high-quality evidence on the safety and efficacy of AI interventions, randomised controlled trials (RCTs) remain the gold standard. However, the completeness and quality of reporting among AI trials in oncology remains unknown.

Objective This systematic review investigates the reporting concordance of RCTs for AI interventions in oncology using the CONSORT (Consolidated Standards of Reporting Trials) 2010 and CONSORT-AI 2020 extension guideline and comprehensively summarises the state of AI RCTs in oncology.

David Chen et al

BMJ Oncology 4 e000733 (open access)

Specific Cancers

Enfortumab vedotin with pembrolizumab for untreated unresectable or metastatic urothelial cancer when platinum-based chemotherapy is suitable

Technology appraisal guidance

Nice Guidance TA1097

Editorial

Adjuvant chemotherapy in locoregionally advanced nasopharyngeal carcinoma: where do we stand? (see next item for the article)

Pui Lam Yip

BMJ Oncology 4 e000894 (open access)



Real-world experience on efficacy and safety of different adjuvant chemotherapy regimens in locoregionally advanced nasopharyngeal carcinoma

Jie Chen et al

BMJ Oncology 4 e000718 (open access)

Original research

Open-label, single-arm study to assess the implementation of and patient experience with home-based daratumumab administration in patients being treated for multiple myeloma

Multiple myeloma (MM) is an incurable cancer of malignant plasma cells. The standard of care is continuous therapy. As a result, the burden and cost of care for patients is high. Interventions to reduce some of the burdens that patients face are vital to improving the patient experience, reducing financial toxicity and time burden of care. Because of these concerns, we developed a trial to evaluate the administration of daratumumab at home for patients with MM.

Adam F Binder et al

BMJ Connections Oncology 2 e000043 (open access)

Original research

Expectations, experiences and effects for couples participating in a digital sexual rehabilitation programme after radical prostatectomy: a feasibility study in Sweden

Prostate cancer treatment commonly affects sexual function. However, how effective rehabilitation programmes should be constructed is yet to be determined. The aim of this study was to describe the expectations, experiences and preliminary effects of a digital sexual rehabilitation programme among couples after radical prostatectomy and to determine its feasibility

Samuel Ask et al

BMJ Connections Oncology 2 e000010 (open access)

Isatuximab in combination for untreated multiple myeloma when a stem cell transplant is unsuitable

Technology appraisal guidance

Nice Guidance TA1098

Survivorship

Editorial

Second primary cancers in breast cancer survivors

Contextualising risk with population based data

Survivors of breast cancer need integrated follow-up care that appropriately meets their long term needs and minimises their health risks. One such risk is the



development of second primary cancers—new malignancies that are neither recurrences nor metastases of the index breast cancer. These may arise in other organs and tissues, as well as in the contralateral breast.

Maria-José Sánchez

BMJ 390 (8471) r1798

Research

Second cancers in 475 000 women with early invasive breast cancer diagnosed in England during 1993-2016: population based observational cohort study

Objective - To describe long term risks of second non-breast primary cancers and contralateral breast cancers among women with early invasive breast cancer after primary surgery.

Paul McGale et al

BMJ 390 (8471) e083975