particularly those with possible micrometastatic disease, and may well redefine the role of adjuvant therapy. The status of the regional nodal basins still remains the single most important variable predicting prognosis. ALND provides the benefit of regional control of axillary disease and may improve overall survival.[16] Surgical removal of microscopic nodal metastases may be curative in certain populations. It is possible that some patients may be spared the use of adjuvant chemotherapy or offered its use, depending whether micrometastasis can be found with the highly sensitive techniques described.

In addition to clinicopathological parameters such as estrogen-receptor and progesterone-receptor status, tumour size, DNA ploity, degree of angiogenic activity, which the authors and others have studied in detail, molecular markers such as those delineating expression of apoptosis-regulating genes such as *P53* and *BCL-2* or *HER2*-overexpressing tumours may allow prediction of prognosis and chemoresponsiveness.[17] Gene expression arrays technology can identify individual profiles that may predict prognosis or treatment response and, if validated, this approach may enable the selection of patients who could benefit and chemotherapy that will optimize treatment, minimize toxicity and select the right patient for the most effective treatment.

References

1. Marschall J, Nechala P, Colquhoun P, Chibbar R. Reassessing the role of axillary lymph-node dissection in patients with early-stage breast cancer. *Can J Surg* 2003;46:285-9.
2. Cancer Care Ontario Practice Guidelines — Breast Cancer Disease Site Group. The role of adjuvant systemic therapy in node-negative breast cancer. *Curr Oncol* 1999; 6:78-89.
3. Danforth DN Jr. The role of axillary lymph node dissection in the management of breast cancer. *PPO Updates* 1992;6:1-16.
4. Fisher B, Redmond C, Fisher ER, Bauer M, Wolmark N, Wickerham DL, et al. Ten-year results of a randomized clinical trial comparing radical mastectomy and total mastectomy with and without radiation. *N Engl J Med* 1985;312:674-81.
5. Fisher B, Wolmark N, Bauer M, Redmond C, Gebhardt M. The accuracy of clinical nodal staging and of limited axillary dissection as a determinant of histologic nodal status in carcinoma of the breast. *Surg Gynecol Obstet* 1981;152:765-72.
6. Fisher B, Jeong JH, Anderson S, Bryant J, Fisher ER, Wolmark N. Twenty-five-year follow-up of a randomized trial comparing radical mastectomy, total mastectomy, and total mastectomy followed by irradiation [see comment]. *N Engl J Med* 2002;347: 567-75. Comment in: *N Engl J Med* 2003;347:1270-1.
7. Fisher B, Anderson S, Bryant J, Margolese RG, Deutsch M, Fisher ER, et al. Twenty-year follow-up of a randomized trial comparing total mastectomy, lumpectomy, and lumpectomy plus irradiation for the treatment of invasive breast cancer [see comments]. *N Engl J Med* 2002;347:1233-41. Comments in: *N Engl J Med* 2002;347: 1270-1; *N Engl J Med* 2003;348:657-60.
8. Morton DL, Wen DR, Wong JH, Economou JS, Cagle LA, Storm FK, et al. Technical details of intraoperative lymphatic mapping for early stage melanoma. *Arch Surg* 1999;127:392-9.
9. Krag DN, Weaver DL, Alex JC, Fairbank JT. Surgical resection and radiolocalization of the sentinel lymph node in breast cancer using a gamma probe. *Surg Oncol* 1993;2:335-40.
10. Giuliano AE, Kirgan DM, Guenther JM, Morton DL. Lymphatic mapping and sentinel lymphadenectomy for breast cancer. *Ann Surg* 1994;220:391-401.
11. Bass SS, Cox CE, Ku NN, Berman C, Reintgen DS. The role of sentinel lymph node biopsy in breast cancer. *J Am Coll Surg* 1999;189:183-94.
12. Giuliano AE, Jones RC, Brennan M, Statman R. Sentinel lymphadenectomy in breast cancer. *J Clin Oncol* 1997;15:2345-50.
13. Ollila DW, Shtzenber KB. Breast cancer sentinel node metastasis: histopathologic detection and clinical significance. *Cancer Control* 2001;8:407-14
14. Ludwig International Breast Cancer Study Group. Prognostic importance of occult axillary node micrometastasis from breast cancer. *Lancet* 1990;335:1565-8.
15. Zervos EE, Burak WE Jr. Lymphatic mapping in solid neoplasms: state of the art. *Cancer Control* 2002;9:189-202.
16. Moore MP, Kinne DW. Axillary lymphadenectomy: a diagnostic and therapeutic procedure. *J Surg Oncol* 1997;66:2-6.
17. Silvestrini R, Daidone MG, Luisi A, Boracchi P, Mezzetti M, Di Fronzo G, et al. Biologic and clinicopathologic factors as indicators of specific relapse types in node-negative breast cancer. *J Clin Oncol* 1995;13:697-704.

Correction

In the article "Users' guide to the surgical literature: how to perform a literature search" by Birch and associates in the April issue (*Can J Surg* 2003;46:136-41), figures 2 and 3 were transposed; the legends are correct. We apologize to the authors and our readers for this error.