

## BOOK NOTES

**Automated Afterloading in Branchytherapy** *by the National Health Technology Advisory Panel*

(Australian Institute of Health, Canberra, 1989) pp.vi + 13, ISBN 0 642 14598 9

Branchytherapy, an established procedure in radiation oncology, "is a technique of radiotherapy involving implanting a solid radioactive source within a malignant tumour, applying it to the surface of a tumour, or inserting it into an applicator within a body cavity" (p.2). There are some clinical advantages associated with the procedure, but a disadvantage is "the exposure of medical, technical and nursing staff as well as visitors and other patients to radiation" (p.2). To address this problem, automated afterloading devices, which are installed in shielded wards, have been developed. This enables radioactive sources to be applied, using computer control systems, and placed in a lead safe when other persons enter the ward.

It has been estimated that current levels of radiation exposure for medical staff would result in one cancer every hundred years. "Genetic disorders would be induced at a comparable rate. The use of automated afterloading to avert occupational cancers would cost about \$40 million per fatal cancer prevented" (p.1).

**DPD**

**High Energy Radiotherapy Equipment** *by the National Health Technology Advisory Panel*

(Australian Institute of Health, Canberra, 1989) pp.vi + 17, ISBN 0 642 14597 0

This discussion paper is concerned with issues associated with the choice of a particular type of radiotherapy equipment, the choice of accelerators for radiotherapy. 'High energy' relates to "machines generating photons with energies of 18MV or more" (p.1). There is variation between the Australian States on the supply of high energy radiotherapy services, and a "paucity of clinical evidence to guide decisions as to the relative value of photon treatment using maximum energies from 6MV to 25MV" (p.12).

**DPD**