Dear Sir/Madam

We thank Dr Van Bockstal and colleagues for their letter, titled ‘The Baader-Meinhof phenomenon in ductal carcinoma in situ of the breast’ in response to our review ‘Ductal carcinoma in situ - update on risk assessment and management’1. Van Bockstal et al raise the issue of the often ignored ductal carcinoma in situ (DCIS) microenvironment, in particular myxoid-appearing stroma, and its role in modulating disease outcome in DCIS.

As Van Bockstal et al acknowledge, detailed appraisal of the prognostic significance of the DCIS microenvironment was beyond the scope of our review. While we did not specifically draw attention to the changes in the DCIS stroma seen in Figure 1 of our review, we acknowledge the importance of the DCIS microenvironment in determining disease outcome. This has been demonstrated by the work of Van Bockstal et al2, which we cited in our review, and others investigating the role of myoepithelial cells3,4, stromal proteins5,6, and the immune response in DCIS7. Indeed, we have published extensively on the role of the tumour microenvironment in DCIS, including angiogenic patterns surrounding DCIS8,9 and the significance of the immune infiltrate to prognosis7.

The microenvironment is clearly a major factor in DCIS biology which in the past has been overshadowed by an emphasis on the tumour epithelium. As Van Bockstal et al state, it is hoped that increased awareness of and research into the non-epithelial components of a DCIS lesion will lead to the development of improved DCIS biomarkers to optimise patient management.

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References

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