

Editorial

Welcome to Volume 4 Issues 2–3 of the *Journal of Radiotherapy in Practice*. As mentioned in the previous issue, the Editorial Board are now moving forward with our new publishers, Cambridge University Press (CUP), following a slight hiatus whilst the publishing support team for JRP was restructured.

It is also timely in the evolution of the journal to revise and expand our list of reviewers to help deal with the increasing number of submissions we are receiving. To this end, the Editors-in-Chief would welcome expressions of interest from colleagues wishing to participate in peer review of articles for JRP. After all, this is one way of demonstrating learning and development for CPD, so pick up the phone or e-mail us today!

The continuing international shortage of therapy radiographers and medical oncologists and the growing pressure for cancer services to treat increasing numbers of patients has resulted in opportunities for development of role extension and advanced practice for therapy radiographers. This has been a particular feature of UK provision recently, hence it is interesting to see the publication of two papers in this issue from other countries which are facing similar professional dilemmas in the arena of role extension and advanced practice.

Amanda Bolderston offers some interesting insights and perspectives about the drivers for advanced practice in Canada, having looked at developments in other arenas in the world. She alludes to the fact that there is a need for clearer definition of, and distinction between, terminology such as “advanced practice” and “role extension” etc. This is followed by an article from White et al. who explore the potential for role extension by therapy radiographers in Hong Kong, to help reduce workload pressures for oncologists, maximise patient throughput and enhance the status of the radiographers.

It is interesting and timely in this context therefore, to note that the Radiotherapy in Practice 2

conference to be held at Sheffield Hallam University, UK, on September 17th and 18th 2005, has as one of its themes “Advancing Practice, Improving Services” where practitioners who have implemented advanced practice in UK departments will share their perspectives on the issues faced and the benefits to patients, staff and the service. JRP will publish abstracts from this conference in a forthcoming issue.

It is interesting in this context, that interpretation and evaluation of portal images, which is regarded as an area where therapy radiographers can extend and develop their role, is the subject of a study by Rybovic et al. They explored whether confidence, formal training or years of experience influence the accuracy of portal image review by radiation therapists? The study highlights the importance of focussing upon EPI training and the need for further research into image interpretation skills and technical decision-making.

The next article is a literature review of prostate brachytherapy by Bownes and Flynn. This is a topical area to explore, as brachytherapy has increasingly become a viable treatment option for managing localised prostate cancer. The authors emphasise the need for close integration between imaging techniques and the placement of radioactive sources.

This is followed by a study presented by Flinton and Walters, undertaken in Ireland, to explore the possible relationship between physical activity and prostate cancer risk. The findings indicate general support for physical activity offering some reduction in risk of developing prostate cancer. This may have important implications for health promotion.

Continuing the prostate theme, in this issue, Griffiths et al. make recommendations for “best practice” for radiographer set-up in conformal radiotherapy treatments for patients with prostate cancer. These recommendations originated from work undertaken as part of the MRC RT01 trial,

and offer important factors to consider when implementing and delivering such techniques.

Griffiths et al. indicate that methods of controlling rectal filling are required to reduce variability of prostate position. This and other issues are also explored in a review article by Pete Bridge exploring available internal organ immobilisation techniques. He concludes however, that the extent to which these may be successfully deployed are limited, and it may be prudent to approach the problem from a different perspective by employing techniques, which account for tumour movement rather than trying to control tumour position.

Hornsby et al. provide us with a valuable example of how sharing of practice between departments can be a vehicle for improving standards of care and providing equity of experience. This collaboration helps overcome the perennial problem of “re-inventing the wheel”, which is still all too prevalent in cancer services. This article explains the outcomes of collaborative work between the

five Scottish Cancer Centres and resulted in a Best Practice Statement of skincare for patients receiving radiotherapy.

Finally in this issue, Thomas explores some of the management issues faced by radiotherapy physics departments in the UK. It offers some valuable insights into the problems and dilemmas faced whilst concluding that there is an overwhelming need for radiotherapy physics departments to invest in the education and training of existing staff as opposed to seeking solutions from the external labour market.

As Editors-in-Chief we would continue to encourage colleagues to interact with JRP and the members of the Editorial Board. It is your journal and we welcome and crave your involvement, participation and views. Please let us know how JRP can be improved to further enable us to meet your needs?

*David Eddy and Angela Duxbury
Editors-in-Chief*