

# Review of: "Long-Term Risk of Medication-Related Osteonecrosis of the Jaw (MRONJ) After Bisphosphonates and/or Denosumab in Metastatic Breast Cancer Patients"

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Potential competing interests: No potential competing interests to declare.

The article by Fusco et al. is a commentary on the article **Incidence of Medication-Related Osteonecrosis of the Jaw in Patients With Breast Cancer During a 20-Year Follow-Up: A Population-Based Multicenter Retrospective Study**, a recent study by Brunner et al. published about MRONJ in the Journal of Clinical Oncology.

The authors bring necessary clarifications regarding the objectives that MRONJ incidence studies should have, especially regarding the clear definition of the moments in time when treatment with bisphosphonates or denosumab was started versus when the disease was diagnosed, or if it was administered preventively. Likewise, the moment when MRONJ appears is often different from the time when MRONJ is diagnosed, due to the lack of dental monitoring of these patients.

Since in this field RCT studies are very difficult to perform and often it is not ethical to deprive the patient of a certain treatment important for his survival, I believe that the oncological records should be more detailed, so that they include for each patient the exact dates of the diagnosis of each health problem and the moment when a certain treatment is introduced, as well as the adverse effects that appear.

Fusco's article is therefore welcomed because it mentions what details should be highlighted in these charts and should be taken into account by the institutions that monitor oncological patients.