

view of neutron therapy is outdated, are simply unreasonable. The whole issue of the utility of neutron therapy remains highly controversial internationally after more than 25 years of research and clinical practice. The issues remain unchanged: lack of proven benefit, narrow spectrum of clinical indications, offset by excessive toxicity demonstrated in the majority of published studies. While we recognise the difficulty of completing randomised clinical trials in this setting, it is important to note the absence of high-quality data to support this expensive technology.

Despite the claims of the proponents of such research on the topic of neutron therapy, we note a paucity of well-structured published research on the role of this treatment modality. It appears that the majority of use of available equipment has been for routine clinical practice, despite the absence of significant, recent published data to support such therapy; one might have hoped that investigational equipment might have been used to produce new data.

Perhaps of more importance, in a continent that is challenged by a shortage of costly medical resources, it seems importune to make a case for maintenance of an expensive, controversial, unproven therapy with so few indications, and to criticise an earnest and honest attempt to bring reason to the debate. We support Prof Abratt's view, based on logic, fiscal pragmatism, and recognise his presence as a leader in academic radiation oncology with several decades of carefully structured published data.

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1. Abratt RP. The fast neutron therapy programme for patients in South Africa should come to an end. *S Afr Med J* 2012;102(2):58.
2. Abratt RP. Neutron radiotherapy in South Africa: Abratt replies. *S Afr Med J* 2012;102(5):270-271.

Neutron radiotherapy: Abratt supported

To the Editor: We write, with some unease, given that much of this matter is internal to the medical affairs of South Africa (SA), to lend support to the stance of Prof Abratt,^{1,2} regarding closure of the neutron facility in SA.

We recognise clearly the limitations of participating in this debate when we are not South African and do not practise medicine in the African continent. That said, there are points of illogic in the criticisms of Prof Abratt's stand that must be challenged.

Firstly, the rhetoric supporting the purported importance of recent research on neutron therapy, and the charge that Prof Abratt's