Letter to the Editor

Clinical Cancer Research

Replication of Genetic Polymorphisms Reported to Be Associated with Taxane-Related Sensory Neuropathy in Patients with Early Breast Cancer Treated with Paclitaxel—Response

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We thank Apellániz-Ruiz and colleagues (1) for their interest in our study (2) and for their thoughtful comments.

Both maximum taxane-related sensory neuropathy (TRSN) and cumulative dose TRSN analysis have been conducted under an additive genetic model, as described in our article (2), for three single-nucleotide polymorphisms (SNP; rs7349683, rs301927, and rs209709). We have now performed both analyses under a recessive model for these SNPs.

The SNP rs7349683 in *EPHA5* was associated with decreased risk of both maximum TRSN (T-allele homozygote, OR, 0.57; 95% CI, 0.38–0.87; $P = 0.009$) and cumulative TRSN (T-allele homozygote, HR, 0.68; 95% CI, 0.48–0.97; $P = 0.035$). This is consistent with the results previously reported (1).

However, rs301927 in *EPHA6* was associated with decreased risk of both maximum TRSN (A-allele homozygote, OR, 0.68; 95% CI, 0.52–0.89; $P = 0.004$) and cumulative TRSN (A-allele homozygote, HR, 0.71; 95% CI, 0.57–0.88; $P = 0.002$). This association had a discordant direction of effect to the results reported in the article (1). We found no evidence of association for rs209709 in *EPHA8* under a recessive model ($P = 0.97$ for maximum TRSN and $P = 0.94$ for cumulative TRSN).

Disclosure of Potential Conflicts of Interest

No potential conflicts of interest were disclosed.

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