To the Editor:

Harris et al are to be congratulated for making an assault on the classification of the lymphoid malignancies. This is most timely. It is to be hoped that their proposal will form the framework upon which a new classification that is both biologically accurate and clinician friendly may be based and that it will continue to be useful for at least the early part of the 21st Century.

Clearly, before this is a reality, the onco-hematology community needs to assess the proposal critically. It needs to be scrutinized closely by the pathologists who were not involved in its formulation for practicability and reproducibility. The absolute criteria for establishing a particular diagnosis must be rigorously defined. Whether it is appropriate to include all lymphoma neoplasms may be questioned. Clinicopathologic correlations need to be made between the new categories of lymphoma proposed and outcome for the patients to determine clinical relevance.

And finally, a condensed, comprehensive version will be needed such that the physician will have a sense of which treatment is most likely to be best for which type of lymphoma. This may take some time. But with some enthusiasm, much is possible. At best, we will soon have a new classification of the lymphomas that incorporates recently acquired greater understanding of the disease processes involved. At worst, we will have been stimulated to try again immediately. Either will have been worth the effort and hopefully will have justified the time, energy, and resources already expanded.

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The proposed revised European-American classification of lymphoma [letter]

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