Title
In regard to Vapiwala et al

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To the Editor: Vapiwala et al (1) make numerous excellent points regarding training the next generation of clinical scientists. However, by reserving the Holman pathway for residents pursuing “bench research” (1), the authors perpetuate a stereotype, presumably unintentionally, that careers in laboratory sciences require more nurturing and are more relevant to the long-term health of our specialty than other sciences. This classist view of medical science is what we should find concerning, not the increase in trainees publishing studies using observational datasets. Entry in the Holman pathway “implies a commitment to basic science or clinical testing the left, then a biology-centric approach will leave our field swimming in circles.”

The radiation oncology community also should be skeptical of efforts to prioritize specific scientific disciplines. Although advancing biology is clearly crucial, the diminishing returns argument applies to it just as well. For some cancers, the biology is nicely understood, and the most pressing scientific questions are socioeconomic. Biology will not necessarily provide better answers for key issues such as access to radiation, cost-effectiveness of technologies, health disparities, and survivorship care. If we are bemoaning the depreciation of scientific fundamentals, consider applied mathematics, where increased emphasis is badly needed to solve troubling inefficiencies in our health system. Maximizing output from our labor market requires diversification, not the attitude that some disciplines are more equal than others. If laboratory innovation is the right arm of medical science and clinical testing the left, then a biology-centric approach will leave our field swimming in circles.

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References