Letter to the Editor  
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Megadose Methylprednisolone Effect on Myelofibrosis and Granulocyte-Macrophage Colony-Stimulating Factor

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Borba et al. [1] in their paper entitled ‘Neutropenia associated with myelofibrosis in systemic lupus erythematosus’ stated: ‘It is important to emphasize that although it has been reported that fibrosis could be reversed by steroid therapy, only in 2 cases fibrosis remitted following this treatment’. We have reported that bone marrow fibrosis could be reversed in children and adult patients with myelofibrosis by megadose methylprednisolone (MDMP) [2-5], as was also shown recently by Inoue et al. [6]. I would like to add that recently MDMP has been used orally which is cheaper and more convenient to the patients, and is as effective as the intravenous route [7]. On this occasion, may I also indicate that the stimulating effect of MDMP on chemotherapy-induced granulocytopenia in patients with leukemia [8] was not cited by Moriyama et al. [9] in their related paper. Elevation of endogenous granulocyte-macrophage colony-stimulating factor related to MDMP treatment was also shown by our group [10].

I am aware that the MDMP effect on myelofibrosis was published only recently in this journal [11]. Despite all my effort, I consider Wiktor-Jedrzejczak’s point that ‘some references are less equal than others’ should be appreciated [12].

References


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