About the Cover

Waldenström’s Macroglobulinemia/Lymphoplasmacytic Lymphoma, Version 2.2012

These NCCN Guidelines Insights highlight the important changes specific to the management of Waldenström’s macroglobulinemia/lymphoplasmacytic lymphoma. These include addition of regimens containing novel agents as primary and salvage therapy options, inclusion of the updated summary of response categories and criteria from the sixth international workshop on Waldenström’s macroglobulinemia, and a section on management of peripheral neuropathy in the accompanying discussion.

NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®)

Non–Small Cell Lung Cancer

Lung cancer is the leading cause of cancer death in the United States. An estimated 226,200 new cases of lung and bronchial cancer will be diagnosed in 2012, and 160,300 deaths are estimated to occur. These NCCN Guidelines for Metastatic Non–Small Cell Lung Cancer (NSCLC) only includes information about stage IV NSCLC.

Palliative Care

The goal of the NCCN Guidelines for Palliative Care is to help patients with cancer experience the best quality of life possible by providing guidance for the primary oncology team for symptom screening, assessment, palliative care interventions, reassessment, and after death care. Palliative care should be started by the primary oncology team and augmented by collaboration with an interdisciplinary team of palliative care experts.

Regular Features

EDITORIAL

Assuring Access to Academic Cancer Centers

Harold J. Burstein, MD, PhD

COMMENTARY

Connectors, Translators, Facilitators: Research Advocacy Today

Mary Lou Smith and Cynthia Chauhan

THE LAST WORD

Stemming the Tanning Bed Epidemic: Time for Action

Alan C. Geller, MPH, RN; Sophie J. Balk, MD; and David E. Fisher, MD, PhD
CASE REPORT

1203 Progressive Chronic Lymphocytic Leukemia After Allogeneic Hematopoietic Cell Transplantation

Potjana Jitawatanarat, MD; Arpita Desai, MD; Pradeep Sharda, MD; Hong Liu, MD, PhD; Maureen Ross, MD, PhD; Francisco J. Hernandez-llizaliturri, MD; Philip L. McCarthy, MD; and George L. Chen, MD

This case report presents a patient with poor-prognosis chronic lymphocytic leukemia (CLL) who was treated with chemotherapy and underwent allogeneic hematopoietic cell transplant (alloHCT) but ultimately progressed. The application of the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines) for CLL and the impact of alloHCT on secondary therapy for progressive CLL are discussed.

PERSPECTIVES

1192 Integrating Palliative Care Into Comprehensive Cancer Care

Janet L. Abrahm, MD

This article discusses the barriers to integrating palliative care into cancer care. Unless oncologists have had the opportunity to work with a palliative care team, they may be unaware of what palliative care has to offer patients. Other barriers are compassion fatigue and burnout. Solutions include training fellows and practicing oncologists in palliative care skills, preventing and treating compassion fatigue, and enhancing collaboration with palliative care specialists. As more oncologists develop these skills, process their grief, and recognize the breadth of additional expertise offered by their palliative care colleagues, palliative care will become integrated into comprehensive cancer care.

ORIGINAL ARTICLE

1223 Short-Course Radiation Versus Long-Course Chemoradiation for Rectal Cancer

Bruce D. Minsky, MD; Claus Rödel, MD; and Vincenzo Valentini, MD

The 2 broad approaches to preoperative therapy for rectal cancer are chemoradiation and short-course radiation. The outcomes of these 2 approaches reported in nonrandomized trials are not comparable because of differences in patient selection. However, more recent trials allowed for a more relevant comparison. This article compares the 2 approaches and addresses their emerging roles.

FOCUSED REVIEW

1277 Use of Endobronchial Ultrasound and Endoscopic Ultrasound to Stage the Mediastinum in Early-Stage Lung Cancer

Christopher Gilbert, DO; Lonny Yarmus, DO; and David Feller-Kopman, MD

Lung cancer remains the deadliest cancer. Because treatment and survival are directly linked to disease stage, accurate staging is crucial, and in early-stage lung cancer involves investigation for the presence of metastatic spread via lymph nodes within the thorax. This article reviews the current standards of lung cancer staging in 2012.

Cont. on page x.
Supplements Available Online at JNCCN.org

**TASK FORCE REPORTS**

**NCCN Task Force Report: Evaluating the Clinical Utility of Tumor Markers in Oncology**
Vol 9; Suppl 5, 2011  www.jnccn.org/content/9/Suppl_5

This NCCN Task Force report describes the ways biomarkers have been developed and used; defines common terminology, including prognostic, predictive, and companion diagnostic markers, and analytic validity, clinical validity, and clinical utility; and proposes the use of a combination level of evidence score to aid in the evaluation of novel biomarker tests as they arise. The current state of regulatory oversight and anticipated changes in the regulation of molecular testing are also addressed.

**NCCN Task Force Report: Optimizing Treatment of Advanced Renal Cell Carcinoma With Molecular Targeted Therapy**
Vol 9; Suppl 1, 2011  www.jnccn.org/content/9/Suppl_1

The outcome of patients with metastatic renal cell carcinoma has been substantially improved with administration of the currently available molecularly targeted therapies. However, proper selection of therapy and management of toxicities remain challenging. This NCCN Task Force report summarizes the clinical issues associated with these therapies in an attempt to help practicing oncologists optimize patient outcomes.

**WHITE PAPERS**

**NCCN Biosimilars White Paper: Regulatory, Scientific, and Patient Safety Perspectives**
Vol 9; Suppl 4, 2011  www.jnccn.org/content/9/Suppl_4

As patents for older biologics begin to expire, the United States is developing an abbreviated regulatory process for the approval of similar biologics (biosimilars), which raises important considerations for the safe and appropriate incorporation of biosimilars into clinical practice for patients with cancer. This NCCN White Paper provides guidance regarding the challenges health care providers and other key stakeholders face in incorporating biosimilars in health care practice, including health care provider knowledge, substitution practices, pharmacovigilance, naming and product tracking, coverage and reimbursement, use in off-label settings, and data requirements for approval.

**NCCN Molecular Testing White Paper: Effectiveness, Efficiency, and Reimbursement**
Vol 9; Suppl 6, 2011  www.jnccn.org/content/9/Suppl_6

Personalized medicine in oncology is maturing and evolving rapidly, and the use of molecular biomarkers in clinical decision-making is growing. This raises important issues regarding the safe, effective, and efficient deployment of molecular tests to guide appropriate care, specifically regarding laboratory-developed tests and companion diagnostics. This NCCN White Paper identifies challenges surrounding molecular testing, including health care provider knowledge, determining clinical utility, coding and billing for molecular tests, maintaining clinical and analytic validity of molecular tests, efficient use of specimens, and building clinical evidence.