Complete Response to Erlotinib and Bevacizumab in a Patient With Biphenotypic (Hepatobiliary) Primary Liver Carcinoma

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Biphenotypic (hepatobiliary) primary liver carcinomas [B(H-B)PLCs] are rare tumors with features of both hepatocellular carcinoma and intrahepatic cholangiocarcinoma. This report describes a patient with metastatic B(H-B)PLC who was found to have a single nucleotide variant in the EGFR gene locus R521K who achieved a complete response on imaging after treatment with the combination of an epidermal growth factor receptor inhibitor and a vascular endothelial growth factor inhibitor. This case prompts consideration of further genomic analysis of these rare tumors and the potential use of targeted therapies in the treatment of patients with B(H-B)PLCs.
Making the Grade: The Impact of Low-Grade Toxicities on Patient Preference for Treatment With Novel Agents

Emily H. Castellanos, MD; Sheau-chiann Chen, PhD; Hillary Drexler, MD; and Leora Horn, MD

Targeted therapies have shown clinical benefit in the treatment of solid tumors. The toxicity profiles and treatment duration and schedule of these agents differ considerably from those of traditional chemotherapy. Many studies of targeted therapies report sizeable numbers of grade 1 or 2 toxicities. This study sought to determine whether anticipation of low-grade toxicities and treatment logistics impact patient willingness to undergo therapy.

Independent Prognostic Value of Serum Markers in Diffuse Large B-Cell Lymphoma in the Era of the NCCN-IPI

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Several serum parameters have been evaluated for adding prognostic value to clinical scoring systems in diffuse large B-cell lymphoma, but none of the reports used multivariate testing of more than one parameter at a time. The goal of this study was to validate widely available serum parameters for their independent prognostic impact in the era of the National Comprehensive Cancer Network–International Prognostic Index (NCCN-IPI) score to determine which were the most useful.

A Decade of Changes in Preferences for Life-Sustaining Treatments Among Terminally Ill Patients With Cancer

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Changes over time in preferences for life-sustaining treatments (LSTs) at end of life in different patient cohorts are not well established, nor is the concept that LST preferences represent more than 2 groups (uniformly prefer/not prefer). The purpose of this study was to explore heterogeneity and changes in patterns of LST preferences among 2 independent cohorts of terminally ill patients with cancer recruited a decade apart.

Screening Performance for Frailty Among Older Patients With Cancer: A Cross-Sectional Observational Study of Two Approaches

Toru Okuyama, MD, PhD; Koji Sugano, MD; Shinsuke Iida, MD, PhD; Takashi Ishida, MD, PhD; Shigeru Kusumoto, MD, PhD; and Tatsuo Akechi, MD, PhD

This study investigated the screening performance for frailty of the Vulnerable Elders Survey-13 (VES-13) and the 2-step approach consisting of the VES-13 plus the anhedonia (loss of interest or pleasure) item from Patient Health Questionnaire-9 among older patients with newly diagnosed cancer.

PSA Screening for Prostate Cancer: Why Saying No is a High-Value Health Care Choice

Timothy J. Wilt, MD, MPH, and Philipp Dahm, MD, MHSc

Enthusiasm for cancer screening and treatment of screen-detected cancer has led to widespread prostate-specific antigen (PSA) screening, a marked increase in prostate cancer incidence, and high use of surgical, radiation, and androgen deprivation treatment for screen-detected disease. This has occurred in advance of a full understanding of the clinical and financial tradeoffs. Although questions remain whether lifetime benefits outweigh harms and costs, data indicate that this balance is not favorable through at least 15 years. This article outlines a conceptual framework for determining the value of screening strategies according to screening and treatment intensity.

The Case for Tailored Prostate Cancer Screening: An NCCN Perspective

Michelle L. McDonald, MD, and J. Kellogg Parsons, MD, MHS

A preponderance of clinical evidence supports a significant public health benefit for screening and early detection of prostate cancer in selected men. The challenge lies in maximizing early diagnosis of potentially aggressive but curable disease while minimizing diagnosis and treatment of indolent disease. A tailored approach to population screening in appropriately counseled men, using an evidence-based strategy with judicious prostate-specific antigen testing, will reduce prostate-cancer mortality yet limit overtreatment of clinically insignificant disease.

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Metastatic melanoma is a devastating disease that has been increasing in incidence and until relatively recently had few effective treatment options. With the approval in 2011 of ipilimumab, a monoclonal antibody against cytotoxic T-lymphocyte–associated protein 4 (CTLA-4), however, that has begun to change. Use of this and similar agents can lead to characteristic and varied immune-related adverse events (irAEs); however, experience has shown that these can be managed with patient education, early recognition, and judicious use of systemic steroids. This case report highlights the full spectrum of clinical responses that are possible with the new generation of immunotherapies in metastatic melanoma—from rapidly developing and unpredictable irAEs to impressive and durable disease regressions.

NCCN Report: Opportunities for Improvement in Breast Cancer

In 2010, NCCN initiated the Opportunities for Improvement (OFI) project. Each participating NCCN Member Institution was provided data on guideline concordance and information on time to treatment from the NCCN outcomes database. A project team at each center reviewed these findings and established a program “charter” that outlined a specific plan to address quality issues within their breast cancer treatment system. This supplement to JNCCN includes the final reports from each of the NCCN centers participating in the project. The reports illustrate the range of opportunities for quality improvement in large multidisciplinary practices.