

## IN BRIEF

**CLINICAL TRIALS****Does significance indicate clinical benefit?**

An analysis of phase III trial results published between 2011–2015 using the European Society of Medical Oncology (ESMO)–magnitude of clinical benefit scale (MCBS) indicates that only 31% of treatments that resulted in statistically significant improvements in outcomes met the thresholds for clinical benefit. Investigators also found that fewer than half of the trials analysed were even designed to detect an effect size deemed to confer benefit according to the ESMO–MCBS criteria. These observations indicate a need for more stringent trial designs and use of clinical benefit thresholds.

**ORIGINAL ARTICLE** Del Paggio, J. C. *et al.* Do contemporary randomized controlled trials meet ESMO thresholds for meaningful clinical benefit?. *Ann. Oncol.* <http://dx.doi.org/10.1093/annonc/mdw538> (2016).

**COLORECTAL CANCER****Recurrent disease detected using FDG–PET**

Newly published data indicate the sensitivity of <sup>18</sup>F-fluorodeoxyglucose (<sup>18</sup>F-FDG)–PET for the detection of recurrent disease. A total of 88 patients with no, or equivocal signs of recurrence on clinical examination, but who had raised carcinoembryonic antigen (CEA) levels were examined using <sup>18</sup>F-FDG–PET. Recurrent disease was detected in 56 patients, 49 of whose disease was identified using <sup>18</sup>F-FDG–PET, with a sensitivity and specificity of 88%. Many of these patients went on to receive treatment with curative intent, thus indicating the importance of early detection of recurrent disease.

**ORIGINAL ARTICLE** Khan, K. *et al.* Survival outcomes in asymptomatic patients with normal conventional imaging but raised carcinoembryonic antigen levels in colorectal cancer following positron emission tomography-computed tomography imaging. *Oncologist.* <http://dx.doi.org/10.1634/theoncologist.2016-0222> (2016).

**BREAST CANCER****Eribulin effective against male breast cancer**

Data from a retrospective study in a cohort of 23 men with breast cancer indicate that eribulin is a safe and effective treatment for men with this disease. All patients had at least a stable disease response, with two complete responses, after a median of six treatment cycles. Patients had a median overall survival duration of 65 months. Four patients had grade  $\geq 3$  adverse events, of which two resulted in treatment interruptions, indicating that eribulin is well tolerated.

**ORIGINAL ARTICLE** Giotta, F. *et al.* Eribulin in male patients with breast cancer: the first report of clinical outcomes. *Oncologist.* <http://dx.doi.org/10.1634/theoncologist.2016-0022> (2016).

**HAEMATOLOGICAL CANCER****Free light chains should be monitored in blood**

Biochemical tests for the presence of free light chains (FLCs) are used to indicate a possible diagnosis of multiple myeloma (MM). Most guidelines recommend measurement of urinary FLCs; however, recent research indicates that the presence of FLCs in blood might be a better indicator. In 113 patients with newly diagnosed MM, 100% had measurable  $\kappa/\lambda$  light chain ratios that involved FLCs in blood samples, compared with only 64% in urine samples. Furthermore, a finding of abnormal serum  $\kappa/\lambda$  light chain ratio was found to predict inferior overall survival. These data demonstrate that FLCs in blood, not urine, should be measured in patients with suspected MM.

**ORIGINAL ARTICLE** Dejoie, T. *et al.* Serum free light chains should be the target of response evaluation in light chain multiple myeloma rather than urines. *Blood.* <http://dx.doi.org/10.1182/blood-2016-07-726778> (2016).