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IN BRIEF

PROSTATE CANCER

Enzalutamide plus docetaxel tested in mCRPC

Data from a phase IIb study exploring the safety and tolerability of enzalutamide plus docetaxel in patients with metastatic castration-resistant prostate cancer (mCRPC) show that this combination is safe in these patients, although the majority of patients experience neutropenia (86.4%) and fatigue (77.3%) as treatment-related adverse events. Almost all patients who received combination therapy had decreased serum PSA levels. These findings merit further investigation in a larger cohort of patients.

ORIGINAL ARTICLE Morris, M. J. *et al.* Phase Ib study of enzalutamide in combination with docetaxel in men with metastatic castration-resistant prostate cancer. *Clin. Cancer Res.* http://dx.doi.org/10.1158/1078-0432.CCR-15-2638 (2016)

PROSTATE CANCER

Triple combination therapy tested in mCRPC

Sound biological rationale exists for the co-administration of docetaxel plus abiraterone and prednisone as a treatment regimens for patients with metastatic castration-resistant prostate cancer (mCRPC). Newly published results from a phase Ib dose-escalation study in three cohorts of men with chemotherapy naïve mCRPC suggest a recommended phase II dose of 75 mg/m² docetaxel, 1,000 mg abiraterone, plus 10 mg prednisone. Investigators reported a high rate of serum PSA decline; however, the efficacy of this approach will require further investiation in later-phase clinical trials.

ORIGINAL ARTICLE Tagawa, S. T. *et al.* Phase 1b Study of abiraterone acetate plus prednisone and docetaxel in patients with metastatic castration-resistant prostate cancer. *Eur. Urol.* http://dx.doi.org/10.1016/j.eururo.2016.01.028 (2016)

KIDNEY CANCER

Naptumomab estafenatox ineffective in RCC

The novel immunotherapy naptumomab estafenatox, an anti-5T4 antibody fused with a staphyloccocal superantigen is under investigation as a treatment for a variety of different tumour types. However, the final analyses of a phase II/III clinical trial comparing the efficacy of naptumomab estafenatox administered with interferon (IFN)-α versus IFN-α monotherapy reveal no significant diiference in overall survival between patients who received naptumomab estafenatox plus IFN-α versus those who received IFN-α alone. Despite the failure to achieve any differences in overall survival, this approach might be effective in certain biomarker-defined patient subgroups.

ORIGINAL ARTICLE Hawkins, R. E. *et al.* A randomized phase 2/3 study of naptumomab estafenatox + IFN-α vs IFN-α in renal cell carcinoma: final analysis with baseline biomarker subgroup and trend analysis. *Clin. Cancer Res*, http://dx.doi.org/10.1158/1078-0432.CCR-15-0580 (2016)

PROSTATE CANCER

Integrin inhibitors active against bone metastases

Data from a phase II trial designed to investigate the efficacy of the pan αv-integrin inhibitor abituzumab in patients with metastatic CRPC (mCRPC) reveal that abituzumab, compared with luteinizing hormone receptor agonists/antagonists has no effect on progression-free survival (PFS). However, patients receiving abituzumab had a significant reduction in the progression of bone metastasis after a follow-up duration of 24 months. This effect merits further investigation.

ORIGINAL ARTICLE Hussain, M. *et al.* Differential effect on bone lesions of targeting integrins: randomized phase II trial of abituzumab in patients with metastatic castration-resistant prostate cancer. *Clin. Cancer Res*, http://dx.doi.org/10.1158/1078-0432.CCR-15-2512 (2016)