patients discontinued therapy because of toxicity. Grade 1–3 toxicities were common, but were successfully managed.

The results of this trial are encouraging and a randomized phase II trial is warranted. The authors advocate further research on other targeted therapies based on the molecular biology of RCC.

Alexandra King

Original article Hainsworth JD *et al.* (2005) Treatment of metastatic renal cell carcinoma with a combination of bevacizumab and erlotinib. *J Clin Oncol* **23**: 7889–7896

Prophylaxis of pelvic adhesions following radical oophorectomy for ovarian cancer

Postoperative pelvic adhesion is a recognized adverse effect of retroperitoneal cytoreductive surgery. To date, the literature contains only one report of adhesion prevention in patients with ovarian cancer. A pilot study has now been conducted to assess the efficacy of a sodium hyaluronate–carboxymethylcellulose barrier (Seprafilm®; Genzyme Corporation, Framingham, MA) for the prophylaxis of pelvic adhesions in patients undergoing radical oophorectomy for epithelial ovarian cancer.

Fourteen of the patients prospectively offered placement of the Seprafilm® membrane at the time of primary cytoreductive surgery met full study criteria. Following radical oophorectomy, the barrier was layered over the exposed surface of the pelvic basin. All patients received adjuvant platinum-based chemotherapy (6–8 cycles); secondary laparotomy or laparoscopy were performed within 8 weeks of completion of chemotherapy. Adhesions were assessed and scored according to severity, using a previously defined method. Adhesions were present on the abdominal wall (internal untreated control) and pelvis in 92.9% and 42.9% of patients, respectively. The mean pelvic adhesion score was significantly lower than the mean abdominal wall score ($P=0.002$). Comparative analysis between the study patients and seven historical controls untreated with adhesion prevention revealed that both mean adhesion scores and the area of the pelvis affected by adhesions were significantly reduced in the Seprafilm®-treated group ($P=0.004$ and $P<0.001$, respectively).

These preliminary data support the use of Seprafilm® for the prophylaxis of pelvic adhesions following cytoreductive surgery for ovarian cancer, but the authors caution that further studies involving larger numbers of patients are necessary before definitive conclusions can be drawn.

Alexandra King

Original article Bristow RE and Montz FJ (2005) Prevention of adhesion formation after radical oophorectomy using a sodium hyaluronate–carboxymethylcellulose (HA-CMC) barrier. *Gynecol Oncol* **99**: 301–308

MicroRNA signature predicts prognosis and progression of chronic lymphocytic leukemia

In a paper published in the *New England Journal of Medicine*, Calin *et al.* report that a unique microRNA signature influences the prognosis and clinical course of chronic lymphocytic leukemia (CLL).

The researchers used a microarray of 190 human genes to analyze the microRNA profiles of 94 CLL cell samples. Two factors known to correlate with an aggressive disease course helped to classify the samples: a high level of ZAP-70 protein expression and absence of *IgV_H* gene mutation. The team identified a signature of 13 mature microRNAs that could differentiate between CLL samples according to these parameters. Nine of these microRNAs could distinguish between patients with a short interval between diagnosis and initial therapy and those with a longer interval. This interval correlates with disease activity, as therapy for CLL usually begins only upon development of symptoms, advanced disease, or both. The researchers also found germline or somatic mutations in 5/42 sequenced microRNAs in 11/75 patients with CLL; these mutations were absent in those without cancer ($n=160$; $P<0.001$), which suggests that some microRNAs could function as tumor-suppressor genes.

The authors conclude that microRNA expression can be used as a prognostic marker in CLL. In addition, mutations in microRNA genes are common and might contribute to the mechanism behind this prevalent form of leukemia.

Pippa Murdie

Original article Calin GA *et al.* (2005) A microRNA signature associated with prognosis and progression in chronic lymphocytic leukemia. *N Engl J Med* **353**: 1793–1801

GLOSSARY

microRNA

Small RNA molecules that help regulate gene expression, reducing the production of proteins by target genes