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IN BRIEF

PANCREATIC CANCER

Paclitaxel stabilizes intratumoural gemcitabine levels

Co-administration of a nanoparticle–albumin–paclitaxel formulation with gemcitabine (the only available treatment for pancreatic cancer) increases the intratumour availability of the gemcitabine. A mouse model of pancreatic ductal adenocarcinoma was used to elucidate the mechanism of this effect: paclitaxel promotes the oxidative degradation of cytidine deaminase, the primary enzyme responsible for gemcitabine metabolism. The combination therapy is currently under investigation in a late-stage phase III clinical trial.

Original article Frese, K. K. *et al.* nab-Paclitaxel potentiates gemcitabine activity by reducing cytidine deaminase levels in a mouse model of pancreatic cancer. *Cancer Discov.* doi:10.1158/2159-8290.CD-11-0242

GASTROINTESTINAL CANCER

Induction chemotherapy increases chance of cure

Until recently, there has been no consensus on the best treatment approach for invasive oesophageal cancer. Now, a study in 169 patients with T4 oesophageal cancer who did not have distant metastases has shown that induction triplet chemotherapy significantly improved surgical resection rates and reduced perforation complication during surgery compared with chemoradiation. Induction triplet chemotherapy might, therefore, increase the chances of curative resection for patients with T4 invasive oesophageal cancer.

Original article Miyata, H. *et al.* Clinical relevance of induction triplet chemotherapy for esophageal cancer invading adjacent organs. *J. Surg. Oncol.* doi:10.1002/jso.23081

BREAST CANCER

Standard use of breast-conserving therapy justified?

A new study reports the 20-year follow-up results of the EORTC 10801 phase III randomized trial. This study compared breast-conserving therapy (BCT) followed by radiotherapy with modified radical mastectomy (MRM) in patients with early stage breast cancer. No significant difference was noted in time to distant metastases and overall survival between both treatments. The researchers suggest that the use of BCT as standard of care to patients with early stage breast cancer is justified.

Original article Litière, S. *et al.* Breast conserving therapy versus mastectomy for stage I–II breast cancer: 20 year follow-up of the EORTC 10801 phase 3 randomised trial. *Lancet Oncol.* doi:10.1016/S1470-2045(12)70042-6

PALLIATIVE CARE

Opioids are underprescribed in elderly patients

In a cross-sectional cohort of 24,410 elderly patients (>65 years old) with cancer in Ontario, Canada, Barbera *et al.* measured opioid prescription (OP) rates and evaluated factors associated with OPs. The OP rate increased with severity of pain, but 33% of patients did not receive an OP within 7 days after and 30 days before the assessment of pain. Younger patients, men, those assessed at home, those with comorbidity and those diagnosed with skin cancer were the most likely to receive OPs.

Original article Barbera, L. *et al.* Opioid prescription after pain assessment: a population-based cohort of elderly patients with cancer. *J. Clin. Oncol.* doi:10.1200/JCO.2011.37.3068