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IN BRIEF

GENETICS

Breast and ovarian cancer risk varies by *BRCA* mutation type

In an observational study of women with *BRCA1/2* mutations, risks of ovarian and breast cancers were found to vary by type of mutation. In women with *BRCA1* mutations, three *BRCA1* mutation cluster regions with distinct breast cancer-risk patterns were identified. In women with *BRCA2* mutations, two different cluster regions were identified with different risk patterns for both ovarian and breast cancers. These data suggest that specific *BRCA* genotypes have important implications for cancer-risk assesment.

Original article Rebbeck, T. R. *et al.* Association of type and location of BRCA1 and BRCA2 mutations with risk of breast and ovarian cancer. *JAMA* doi:10.1001/jama.2014.5985

GYNAECOLOGICAL CANCER

Pazopanib is an effective treatment of ovarian cancer

Findings of a phase II trial investigating the antiangiogenic agent pazopanib in patients with platinum-refractory advanced-stage ovarian cancer reveal that treatment with pazopanib plus paclitaxel resulted in significantly longer median progression-free survival than paclitaxel therapy alone (6.4 months versus 3.5 months; $P=0.00042$). Pazopanib treatment, although well-tolerated, resulted in more severe adverse events than paclitaxel alone. These findings indicate a need to test this agent in phase III trials.

Original article Pignata, S. *et al*. Pazopanib plus weekly paclitaxel versus weekly paclitaxel alone for platinum-resistant or platinum-refractory advanced ovarian cancer (MITO 11): a randomised, open-label, phase 2 trial. *Lancet Oncol*. doi:10.1016/S1470-2045(15)70115-4

LUNG CANCER

Intervention mapping for NSCLC treatment selection

Data from genomics, transcriptomics and known treatments of non-small-cell lung cancer (NSCLC) have been combined to produce an algorithm enabling improved treatment selection for patients with NSCLC, based on underlying individual clinical characteristics of the tumour. In total, this study included the activation status of 24 'interventional nodes' which might affect treatment responses. This intervention mapping tool will be used by the WIN Consortium to conduct a prospective clinical trial in patients with metastatic NSCLC.

Original article Lazar, V. *et al*. A simplified interventional mapping system (SIMS) for the selection of combinations of targeted treatments in non-small cell lung cancer. *Oncotarget* 3 April 2015 [Epub ahead of print] http://www.impactjournals.com/oncotarget/index.php?journal=oncotarget&page=article&op=view&path[]=3741

HAEMATOLOGICAL CANCER

Ofatumumab is effective in elderly patients

Testing of the anti-CD20 monoclonal antibody in elderly patients with lymphocytic leukaemia (median age 69 years) in a phase III clinical trial has demonstrated that treatment with ofatumumab plus chlorambucil compared with chlorambucil alone results in significantly improved progression-free survival (median 22.4 months versus 13.1 months; $P<0.001$). More adverse events were detected in the ofatumumab plus chlorambucil group (50% versus 43%). Results suggest this regimen is effective in elderly patients.

Original article Hillmen, P. *et al*. Chlorambucil plus ofatumumab versus chlorambucil alone in previously untreated patients with chronic lymphocytic leukaemia (COMPLEMENT 1): a randomised, multicentre, open-label phase 3 trial. *Lancet* doi:10.1016/S0140-6736(15)60027-7