Research

End-of-Life Care in Adolescents and Young Adults With Cancer  592
End-of-life care in adolescents and young adults is rarely studied. Mack and colleagues assessed treatment during the last month of life in 663 young adults with cancer in the Kaiser Permanente Southern California health care delivery system. Rates of intensive measures exceeded proposed desirable benchmarks among older adults for the final weeks or month of life, including receipt of chemotherapy, any intensive care unit stay or hospitalization, or more than 1 emergency department visit. The majority were hospitalized. Do these data reflect the treatment preferences of young adults with cancer in the last weeks of life? Bleyer provides an Editorial.

Editor’s Note  579

Obesity and Postmenopausal Invasive Breast Cancer Risk  611
Obesity is associated with the development of many cancers. In this issue, Neuhouser and colleagues analyzed extended follow-up data for more than 60 000 postmenopausal women from the Women’s Health Initiative Trial. They found that risk of breast cancer development, particularly estrogen receptor-positive and progesterone receptor-positive breast cancers, was greatest for women with body mass index of 35.0 or greater. Breast cancers in obese women were also associated with more aggressive features. These data add to the growing need for obesity management as a key component in cancer prevention. Hudis and Dannenberg provide an Invited Commentary.

Invited Commentary  622

Radiotherapy and Cardiovascular Implantable Device Malfunction  624
Is radiation therapy detrimental to patients with implanted electronic devices used to improve cardiac function? In a single-institution retrospective analysis, Grant et al studied 249 courses of radiation in 215 patients, 57% with pacemakers and 43% with implantable cardioverter/defibrillators. Single-event upset malfunction, which was the only type of malfunction to cause clinical effects, occurred only during neutron-producing radiation treatment. Patients treated to the abdomen and pelvis were at highest risk. Thomas provides an Editor’s Note.

Editor’s Note  632

Rapid Intraoperative Molecular Characterization of Glioma  662
A rapid intraoperative diagnosis of glioma is essential for the decision to pursue aggressive and definitive surgical resection; however, the low cellularity of some gliomas can make definitive diagnosis by histologic analysis difficult. Shankar et al developed a rapid genotype approach to detect somatic mutations in TERT and IDH1. Assay performance demonstrated high sensitivity and specificity for World Health Organization grade II and III gliomas. Moreover, results could be obtained within 60 minutes of receiving material. Precision medicine in the operating room may aid in achieving better surgical outcomes for this devastating disease.

LETTERS

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Panniculitis in Patients Undergoing Treatment With the Bruton Tyrosine Kinase Inhibitor Ibrutinib for Lymphoid Leukemias
SK Fabbro and Coauthors

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