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Durable Complete Response of Metastatic Gastric Cancer with Anti-Met Therapy Followed by Resistance at Recurrence .......... 573

Précis: An anti-MET monoclonal antibody elicited a 2-year complete response in a patient with metastatic gastric cancer with MET gene polysomy and autocrine HGF production.

A Novel Platform for Detection of CK⁺ and CK⁻ CTCs ............. 580

Précis: An expanded antibody cocktail combined with a microfluidics platform directly incorporating FISH identifies nonepithelial CTCs.
Précis: Dedifferentiated liposarcomas harbor recurring HDAC1 mutations and exhibit aberrant methylomes, suggesting that epigenetic therapies may be effective in these tumors.

combination epigenetic therapy has efficacy in patients with refractory advanced non–small cell lung cancer

Précis: Objective, long-lasting responses are observed in patients with NSCLC treated with azacitidine and entinostat.

For more News and Research Watch, visit Cancer Discovery online at www.AACR.org/CDnews. Online-only News stories include the following:

- HDAC Inhibitors Show Benefits in Breast Cancer
- Phenotypic Profiling Identifies Novel Anticancer Drugs
- Automated Pathology Gives Accurate Predictions
- Triple-Acting Drug Boosts Prostate Cancer Survival
- Analyzing Intact Proteins with Mass Spectrometry
- FDA Pulls Approval for Avastin in Breast Cancer

ON THE COVER

Juergens and colleagues present results from a phase I/II trial showing that combined epigenetic therapy with azacitidine and entinostat can elicit objective responses, including one complete and one partial response, in refractory metastatic non–small cell lung cancer (NSCLC). A decreased methylation signature in response to treatment was associated with longer overall and progression-free survival, indicative of on-target epigenetic effects. Furthermore, several patients had objective responses to subsequent anticancer therapies. This combination epigenetic therapy may therefore be effective in reversing the epigenetic mechanisms driving the progression and resistance of NSCLC. For details, please see the article by Juergens and colleagues on page 598.