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IMAGING, DIAGNOSIS, PROGNOSIS

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Copy Number Gain of 1q25 Predicts Poor Progression-Free Survival for Pediatric Intracranial Ependymomas and Enables Patient Risk Stratification: A Prospective European Clinical Trial Cohort Analysis on Behalf of the Children’s Cancer Leukaemia Group (CCLG), Société Française d’Oncologie Pédriatique (SFOP), and International Society for Pediatric Oncology (SIOP)

A Three-Gene Expression Signature Model for Risk Stratification of Patients with Neuroblastoma
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CANCER THERAPY: CLINICAL

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Phase II Efficacy and Pharmacogenomic Study of Selumetinib (AZD6244; ARRY-142886) in Iodine-131 Refractory Papillary Thyroid Carcinoma with or without Follicular Elements


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Tumor Hypoxia Predicts Biochemical Failure following Radiotherapy for Clinically Localized Prostate Cancer

Michael Milosevic, Padraig Warde, Cynthia Ménard, Peter Chung, Ants Toi, Adrian Ishkanian, Michael McLean, Melanie Pintilie, Jenna Sykes, Mary Gospodarowicz, Charles Catton, Richard P. Hill, and Robert Bristow

PREDICTIVE BIOMARKERS AND PERSONALIZED MEDICINE

Sorafenib Is an Inhibitor of UGT1A1 but Is Metabolized by UGT1A9: Implications of Genetic Variants on Pharmacokinetics and Hyperbilirubinemia


CORRECTIONS

Correction: Molecular Imaging of TGFβ-Induced Smad2/3 Phosphorylation Reveals a Role for Receptor Tyrosine Kinases in Modulating TGFβ Signaling

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ABOUT THE COVER

High-level EGFR gene amplification can be retained in glioblastoma stem-like cell lines established and propagated without recombinant EGF. In contrast, high-level amplification is lost in parallel cell lines from the same tumors established with EGF supplementation. Cell lines with high-level EGFR amplification produce highly aggressive xenograft tumors in the brains of nude mice, retaining the EGFR amplification as shown in the cover figure, whereas counterpart cell lines, lacking high-level amplification, are either nontumorigenic or grow significantly more slowly in vivo. For details, see the article by Schulte and colleagues on page 1901 of this issue.