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Editor's Note

Cancer occurs mostly in the developing countries. Epidemiological studies that evaluate risk factors are important for prognosis and prevention. Journal of Cancer Epidemiology and Prevention reports the ways and means of assessing the cause of cancer, its development trend and its control/prevention. The current issue includes signaling pathways relevant to cancer, effect of traditional medicine on liver cancer, adequacy of minorities' representation in clinical trials, a review on endometrial carcinoma diagnosis and collation of tumor related data as study tool. Intracellular signaling pathways include cyclic nucleotides such as cAMP, Ca^{2+}, and Ca^{2+} channels. Mutations of genes causes deregulation of these pathways leading to growth and dissemination of cancer cells. Errante et al. [1] reviewed the role of Ca^{2+} channels and cyclical nucleotides like cAMP in cancer initiation and growth and suggested that the use of Ca^{2+} channel blockers might modify tumor growth and modifiers of cAMP production might decrease anti-tumor resistance. Liver cirrhosis is the risk factor for liver cancer. Based on a population study comprising of 8145 liver cirrhosis patients, Chen et al. [2], have observed a strong association between the use of traditional Chinese herbal medicines and liver cancer among men. Disproportionately higher incidence of cancer was noted in certain ethnic and racial groups in US.

As we know metastasis, is one of the major causes of mortality in cancer which involves cell adhesion, invasion and migration. In a study, the effect of cinnamon extract on the migration of SiHa (Human cervical tumor) cells was examined. The result showed that cinnamon reduced the migration of cancer cells in significant manner which demonstrates its potential use as an anti-cancer drug in cervical cancer [3]. Cinnamon extract which contains a mixture of polyphenols together with cinnamaldehyde as the major bioactive component, plays a therapeutic role in cervical cancer cells by depolarization of the mitochondrial membrane potential resulting into cellular apoptosis [3].

Therefore, Ibrahim et al. [4] evaluated the patient enrollment in cancer clinical trials in a period of 12 years at William Beaumont Hospital Community Clinical Oncology Program and Cancer Clinical Trials Office. It was observed that overall enrollment was itself low and there was no difference in enrollment of white and minorities. The study suggested increased enrollment of elderly. Prevention of endometrial cancer is limited by inability to identify precancerous lesions. Presently diagnosis is dependent on histopathology. Based on a review study, Chhabra and Gangane [5] observed that conservative therapy is possible only in early stage. Specimen worksheets function as teaching tools for residents, fellows and pathologists. After consultation with breast pathologists and after reviewing both the American Joint Committee on Cancer (AJCC) guidelines and the Cancer Protocol Templates provided by the College of American Pathology (CAP), Chang et al. [6], designed three worksheets. The first worksheet dealt with breast history and included imaging results, diagnostic detail, and previous surgeries. The second and third lumpectomy and mastectomy worksheets included tumor location, tumor size, sampling diagrams, specimen weight, orientation, and surgical margin inking codes. These worksheets were useful for intraoperative consultation and in analyzing information regarding specimen processing. The outcomes highlighted in this issue further our knowledge of prevention, diagnosis and treatment of cancer.

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