



Journal of Carcinogenesis

Covering from Genesis to Therapeutics

Special issue: Gastrointestinal Carcinogenesis and Therapeutics

Gastrointestinal (GI) cancers as a group are the second most common cancers diagnosed in both men and women in North America. Of all the GI cancers, colorectal cancer (CRC) is the most common one amongst newly diagnosed GI cancers and pancreatic ductal adenocarcinoma (PDAC) is the most fatal one due to lack of early diagnosis and limited success of systemic therapy. The incidences of esophageal and hepatobiliary cancers are continuing to increase. Hepatobiliary cancers still remain resistant to cytotoxic and targeted therapy and are often fatal. However, there has been a significant reduction in cancer deaths, including some of the GI cancers (stomach and CRC) since 1991 due to early diagnostic capabilities and increased research activities towards development of novel therapies. In recent years, remarkable progress has been made in understanding of pathogenesis, biology, and molecular genetics of GI cancers. Detection of pre-neoplastic GI lesions and early GI cancers also progressed tremendously using various techniques. Despite all these advancements, clinical management of these diverse and complex GI cancers, especially the metastatic disease remains quite challenging. The management of these complex neoplasms depends on multi-disciplinary approach involving several medical specialties including gastroenterologists, hepatologists, surgical oncologists, medical oncologists, radiation oncologists, radiologists, pathologists, and basic/translational scientists. Over the last few years, these collaborative interactions have resulted in several key innovations and novel approaches that have led to improved understanding of pathogenesis and achieve earlier detection, and advances in the management of GI cancers. For example, there have been significant advancements in unravelling the molecular pathogenesis of Barrett's dysplasia, such as the role of bile acids in the induction of several cellular signaling pathways (Cox-2, Wnt, Notch, TGF- β , Sonic hedgehog and BMP) and the involvement of transcription factor CDX-2 leading to columnar differentiation. Technological advancements for early detection of precursor lesions of GI cancers, especially esophageal and colorectal cancers, resulted in overall lower death rates. [Journal of Carcinogenesis](#), published by Wolters Kluwer Health, is bringing out a special issue focused on GI Carcinogenesis to celebrate the success of the advancements in this field and to collate the gaps in comprehending the genesis, treatment and prevention of GI cancers.

[Journal of Carcinogenesis](#) is soliciting manuscripts that describe recent advances in GI cancer research from molecular, technological and therapeutics perspectives. The journal is especially interested to receive articles that describe the latest developments in molecular pathogenesis, screening and early detection techniques, tumor markers, diagnosis, and clinical trial outcomes related to GI cancers.

The special issue of [Journal of Carcinogenesis](#) will be edited by an experienced group of scientists. Please contact any of these editors for further details. Manuscripts should not exceed 5 pages or approximately 2500 words. Detailed instructions to authors can be found on the journal's web site <http://www.Carcinogenesis.com>. For further details please write to admin@carcinogenesis.com.



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