



American Cancer Society Journals Monthly Highlights for Healthcare Professionals

April 16, 2015 Updates

As many health systems publish monthly newsletters as a means to communicate current research to providers, the American Cancer Society provides newsletter content that is free to use with license to populate your monthly letter. Our content consists of abstracts and other information from the three peer-reviewed medical journals published by ACS: *CA: A Cancer Journal for Clinicians*, *Cancer*, and *Cancer Cytopathology*.

Please direct any questions to Antonio Shaw at 404-329-4361 or antonio.shaw@cancer.org

CA: A Cancer Journal for Clinicians

- *CA* is a journal for oncologists, primary care physicians, nurses and anyone involved in cancer care.
- *CA* offers all content for free online. Go to cacancerjournal.com.
- *CA* offers free journal-based continuing education to health professionals. Visit acsjournals.com/ce to learn more.

Cancer

- *Cancer* is a general oncology journal for all oncology specialists.
- *Cancer* offers all content 12 months or older online for free. Go to canceronlinejournal.com to access the abstracts of the latest research articles available online.
- *Cancer* publishes educational supplements online for free.

Cancer Cytopathology

- *Cancer Cytopathology* is a specialty journal for cytopathologists and cytotechnologists.
- *Cancer Cytopathology* offers all content 12 months or older online for free. Go to cancercytojournal.com to access the abstracts of the latest research articles available online.

Continuing Education Program

- Free CME and CNE is available for select articles in *CA* at acsjournals.com/ce
- Continuing medical education credit is available through Wiley-Blackwell's accreditation with the Accreditation Council for Continuing Medical Education.
- Continuing nursing education contact hours are available through the Society's accreditation with the American Nurses Credentialing Center.

Additional free content:

- Read the "Best of the American Cancer Society Journals 2014" digital issue: bit.ly/ACSBestof2014
- Read the "American Cancer Society: Guidelines & Patient Pages" digital issue: bit.ly/acsguidelines

Free iPad/iPhone apps:

Each journal has its own iPad/iPhone app. Download one now by going to:

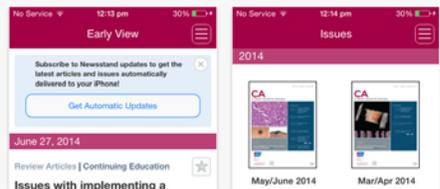
CA: A Cancer Journal for Clinicians: bit.ly/1zQEUG9

CA: A Cancer Journal for Clinicians [View More by This Developer](#)
 By Wiley Publishing
 Open iTunes to buy and download apps.



Description
 One of the oldest peer-reviewed journals in oncology, brought to you by the American Cancer Society, is now available on your iPad and iPhone. Fresh from the newsstand, "CA: A Cancer Journal for Clinicians" brings you the latest information on all aspects of cancer prevention, screening, diagnosis, treatment, survivorship, and palliation.

Screenshots iPhone | iPad



Free
 Category: Education
 Released: Jul 20, 2014
 Version: 2.0.2125
 Size: 6.3 MB
 Language: English
 Seller: Wiley
 © John Wiley & Sons, Inc.
 Rated 12+ for the following:
 Infrequent/Mild Medical/Treatment Information

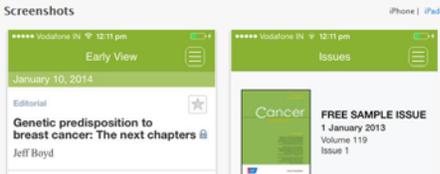
Cancer: bit.ly/1nPMKqx

Cancer (journal) [View More by This Developer](#)
 By Wiley Publishing
 Open iTunes to buy and download apps.



Description
 As a journal of the American Cancer Society, "Cancer" is now available on your iPad! Stay informed on all aspects of cancer diagnosis, treatment, and prevention as you work on the frontlines in the battle against cancer. Receive updates on the most important developments in oncology.

Screenshots iPhone | iPad



Free
 Category: Education
 Released: Jan 31, 2014
 Version: 1.0.2123
 Size: 7.6 MB
 Language: English
 Seller: Wiley
 © John Wiley & Sons, Inc.

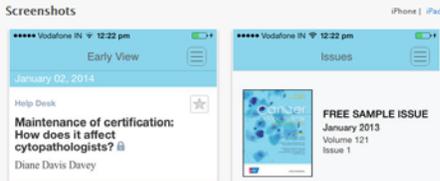
Cancer Cytopathology: bit.ly/1nPOobG

Cancer Cytopathology [View More by This Developer](#)
 By Wiley Publishing
 Open iTunes to buy and download apps.



Description
 As a journal of the American Cancer Society, "Cancer Cytopathology" is now available on your iPad! Stay informed on all aspects of cytopathology and its related oncologic disciplines. Receive updates on the most important developments in cytopathology even faster.

Screenshots iPhone | iPad



Free
 Category: Education
 Released: Jan 30, 2014
 Version: 1.0.2123
 Size: 7.1 MB
 Language: English
 Seller: Wiley
 © John Wiley & Sons, Inc.



Follow the American Cancer Society journals on Twitter, Facebook, and Google+:

- [Twitter.com/CancerCytopath](https://twitter.com/CancerCytopath)
- [Twitter.com/CAonline](https://twitter.com/CAonline)
- [Twitter.com/JournalCancer](https://twitter.com/JournalCancer)
- [Facebook.com/ACSJournals](https://facebook.com/ACSJournals)
- [Google+: goo.gl/wB4GC3](https://goo.gl/wB4GC3)

CA

A Cancer Journal for Clinicians



A perfect storm: How tumor biology, genomics, and health care delivery patterns collide to create a racial survival disparity in breast cancer and proposed interventions for change

It is well known that there is a significant racial divide in breast cancer incidence and mortality rates. African American women are less likely to be diagnosed with breast cancer than white women but are more likely to die from it. This review explores the factors that may contribute to the racial survival disparity. Consideration is paid to what is known about the role of differences in tumor biology, genomics, cancer screening, and quality of cancer care. It is argued that it is the collision of 2 forces, tumor biology and genomics, with patterns of care that leads to the breast cancer mortality gap. The delays, misuse, and underuse of treatment for African American patients are of increased significance when these patients are presenting with more aggressive forms of breast cancer. In the current climate of health care reform ushered in by the Affordable Care Act, this article also evaluates interventions to close the disparity gap. Prior interventions have been too narrowly focused on the patient rather than addressing the system and improving care across the continuum of breast cancer evaluation and treatment. Lastly, areas of future investigation and policy initiatives aimed at reducing the racial survival disparity in breast cancer are discussed.

<http://onlinelibrary.wiley.com/enhanced/doi/10.3322/caac.21271/>

Published online: 04/09/15

Cancer



A note from history: Landmarks in history of cancer, part 7

The 25 years from 1970 and 1995 are the high-water mark in clinical oncology, and this is the period when oncology turned from art to science.

<http://onlinelibrary.wiley.com/enhanced/doi/10.1002/cncr.29365/>

Published online: 04/14/15

CancerScope: Electrical device for patients with glioblastoma met with support, skepticism: Some question the device's efficacy, others tout it as a new standard of care

Researchers leading a study of an electrical device that treats glioblastomas tout it as a new standard of care for the disease, whereas other physicians question its effectiveness. Roger Stupp, MD, principal investigator of the study and director of the Cancer Center at the University Hospital Zurich in Switzerland, presented the results of the study at the 19th Annual Scientific Meeting and Education Day of the Society for Neuro-Oncology held in Miami, Florida, in November, 2014. The device, formerly known as NovoTTF and now called Optune, is a noninvasive therapy that targets dividing cancer cells in the brain. It creates alternating, “wave-like” electric fields called tumor-treating fields (TTFields) that travel across the upper part of the brain in different directions to help slow or stop recurrent glioblastoma multiforme (GBM) cancer cells from dividing. It is manufactured by Novocure Inc, a commercial stage oncology company headquartered in Jersey, an English island off the coast of France, and is available at 150 cancer centers across the United States.

<http://onlinelibrary.wiley.com/enhanced/doi/10.1002/cncr.28991/>

Published online: 03/18/15

CancerScope: Analysis shows CT lung cancer screening is cost effective

Low-dose computed tomography (CT) screening can be cost-effective when compared with no screening among aging smokers, according to a recent analysis of results from the National Lung Cancer Screening Trial. The trial, which involved more than 53,000 smokers aged 55 to 74 years, concluded that helical CT scanning reduced mortality from lung cancer by 20% when compared with chest X-rays. The recently published analysis of the trial results was conducted by researchers at Brown University School of Public Health in Providence, Rhode Island, and the Geisel School of Medicine at Dartmouth College in Hanover, New Hampshire. The researchers examined the financial implications of screening versus not screening by calculating a ratio of the costs of CT screening per person as well as the number of “quality-adjusted life-years added” per person across the population.

<http://onlinelibrary.wiley.com/enhanced/doi/10.1002/cncr.29343/>

Published online: 03/18/15

CancerScope: Quality of life in patients with high-risk prostate cancer improves with shorter course of androgen deprivation therapy

A shorter course of androgen deprivation therapy (ADT) combined with radiotherapy (RT) leads to a quicker recovery of normal testosterone levels in patients with prostate cancer, resulting in better quality of life without affecting long-term outcomes, new research has found. The research, presented at the American Society for Radiation Oncology annual meeting (held in September, 2014 in San Francisco, California), analyzed data from 561 patients with high-risk prostate cancer in a multicenter, randomized phase 3 trial in Canada. Patients were randomized into 2 groups: one receiving 18 months of ADT and RT and the other receiving 36 months of ADT and RT. RT was initiated 4 months after the start of ADT in both groups.

<http://onlinelibrary.wiley.com/enhanced/doi/10.1002/cncr.29285/>

Published online: 03/18/15

CancerScope: New immunotherapies show promise in some patients: Physicians try to balance optimism with realistic expectations

Although some patients have shown remarkable responses to the latest types of immunotherapies, the majority of patients have not experienced such dramatic results. In addition, the latest immunotherapy drugs are expensive—in the range of \$120,000 to \$150,000. That leaves physicians trying to balance their optimism with realistic expectations. “This is one of the most exciting findings in cancer in the last 5 to 10 years,” says Walter Stadler, MD, section chief of hematology/oncology at the University of Chicago Medicine in Illinois. “But we have dealt with this for as long as I’ve been in this business in terms of communicating the hopefulness and promise we see in new drugs while at the same time articulating the challenges. This is not going to make everyone’s cancer go away.”

<http://onlinelibrary.wiley.com/enhanced/doi/10.1002/cncr.28992/>

Published online: 04/08/15

CancerScope: FDA approves Gardasil 9 for more types of HPV

In December 2014, the FDA approved Gardasil 9 (human papillomavirus [HPV] 9-valent vaccine recombinant) (Merck and Company, Kenilworth, NJ) for the prevention of certain diseases caused by 9 types of HPV. The new vaccine covers 5 more HPV types than the previously approved formulation of Gardasil. The new vaccine is approved for use in females aged 9 to 26 years and males aged 9 to 15 years. It has the potential to prevent approximately 90% of cervical, vulvar, vaginal, and anal cancers. Specifically, it is approved to prevent those cancers that are caused by HPV types 16, 18, 31, 33, 45, 52, and 58 and for the prevention of genital warts caused by HPV types 6 or 11. The 5 additional HPV types covered by Gardasil 9 (types 31, 33, 45, 52, and 58) account for approximately 20% of cervical cancers.

<http://onlinelibrary.wiley.com/enhanced/doi/10.1002/cncr.29374/>

Published online: 04/08/15

Cancer
Cytopathology

**CytoSource: 3-dimensional bioprinting makes its mark: New tissue and organ printing methods are yielding critical new tools for the laboratory and clinic**

Two opposing trajectories are sounding alarm bells around the world: as demand soars for organ transplants, the donor supply is actually dwindling. Scientists have long dreamed of a technology that could bypass the need for donors altogether in favor of livers, kidneys, and other organs fashioned directly from cells and tissue. With rapid advances in a method known as 3-dimensional (3D) bioprinting, a goal once dismissed as science fiction is moving steadily toward reality. "Although the field is at an early stage, it has already succeeded in creating several tissues at human scale that are approaching the functionality required for transplantation," asserts a recent review in Nature Biotechnology.

<http://onlinelibrary.wiley.com/enhanced/doi/10.1002/cncy.21543/>

Published online: 04/14/15

Emerging infections and the cytology laboratory

Throughout history, the medical community has been challenged by several pandemics, including influenza, typhus, smallpox, tuberculosis, human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS), severe acute respiratory syndrome (SARS), and, most recently, Ebola. This list includes newly emerging and reemerging infectious diseases. The later diseases include infections that continue to appear in new locations and in drug-resistant forms or that reappear after supposed control or elimination. They all are contagious diseases. Unfortunately, some of these pathogens are potential agents of biological warfare. Samples from patients infected with these microorganisms need special biohazard handling. A case in point is the recent Ebola crisis, which has heightened awareness of laboratory preparedness, including the cytology laboratory.

<http://onlinelibrary.wiley.com/enhanced/doi/10.1002/cncy.21533/>

Published online: 03/18/15