

Editorial Note

Welcome Note for the Journal: Journal of Cancer Science Research & Therapy

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Since August last year, I have been appointed Founder & Editor-in-Chief of the **"Journal of Cancer Science & Research Therapy"** (Manuscript Scientific Services) available at

https://manuscriptscientific.com/editorialboard/9/journal-ofcancer-science-research-therapy

Happy and proud of this designation, I believe it is a recognition of a lifetime, dedicated to care, teaching and research, in cancer science.

On this occasion, we are proud to launch the first issue, with great editorial effort and with the desire to contribute to the entire medical community in general, and the oncology community in particular, a new tool for reading, information and experience from other medical groups who work for the well-being of our patients and make known with their articles, their lines of work and their results.

No other medical specialty has advanced and grown as much in the past 20 years as oncology has, and these advances are

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likely to continue for the next 20 years.

When I completed my training in oncology in the early 1980s, treatment had three pillars: surgery, radiation therapy, and chemotherapy. The treatments were "dogmatic" and we were treating tumors, not people with cancer.

Today we have moved to a "personalized" medicine, where each patient has her treatment, tailored to her person.

The patient can begin his therapy with chemotherapy, then surgery and do or not do radiotherapy and thus the treatments are indicated according to age, sex, associated diseases and genomic, genetic, biomarker studies, biopsies, images, etc.

At the beginning of my practice, and this is just one example, of patients with advanced melanoma, only 20% had any chance of responding to treatments, short responses, for a short time, with high toxicity and with a poor quality of life. Today, more than half of patients with advanced melanoma live for many years, some are "cured", thanks to immunotherapies and "checkpoint inhibitors".

And so, I could mention dozens of tumors that until 20 years ago were fatal in a short period of time and today many of them are cured and others are alive for more than five years, incorporating the concept of "chronify" the disease into oncology.

Technological advances have also been fundamental. Images obtained by positron tomography (PET SCAN), liquid biopsies, genomic platforms, and so the list is endless.

The COVID-19 pandemic that we are experiencing deserves a separate paragraph, with the addition of a new chapter to our practice, which is called "Cancer and COVID-19".

Cancer patients are still there, millions of new patients with tumors are diagnosed daily and those who are diagnosed need preferential care since the viral infection in them has a more aggressive course and the rates of infection and death from COVID-19 associated with cancer is higher.

A challenge awaits us. Doctors involved in the care of cancer patients are used to challenges, in fact, I think that every cancer patient is "a challenge".

We want the entire Editorial Group of the "Journal of Cancer Science & Research Therapy" to contribute our "little grain of sand" by presenting a serious Journal, based on scientific evidence in its articles, peer-reviewed articles and modern in its editorial conception. Hopefully we achieve it and it can be a tool to help our patients, the main reason for our work.

Thank you.

Adrian P. Hunis MD Founder & Editor in Chief Journal of Cancer Science & Research Therapy