



Prognostic and Predictive Biomarkers of Prostate Cancer

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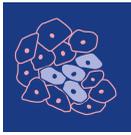
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Message from the Guest Editors

Dear Colleagues,

Prostate cancer is the most common cancer in men. The median age of diagnosis is just before the age of 70, and the five-year survival rate is 94%. Prostate cancer generally presents a good prognosis, and it can, thus, be discussed with the patient of whether to avoid a diagnostic biopsy in certain clinical situations of suspected prostate cancer. In the case of a positive biopsy, there are different options to consider, such as active surveillance, watchful waiting, or the initiation of local treatment. To guide the patient's choice between these options, it is necessary to determine the prognosis of the disease and define the stage of the cancer. Prostate cancer staging is based on the tumor extent using TNM categories, the PSA level and the Gleason score (Grade group). Risk groups, based on PSA, digital rectal examination, and biopsy, from very low to very high are used to determine treatment options, but they are not perfect indicators of the risk. There are ongoing efforts to develop new biomarkers, based on blood or tissue testing, that can aid clinicians in determining which cancers are supposed to be aggressive and need specific treatment.





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Message from the Editor-in-Chief

Cancers is an international online journal addressing both clinical and basic science issues related to cancer research. The journal is publishing in Open Access format, which will certainly evolve to ensure that the journal takes full advantage of the rapidly changing world of information and knowledge dissemination. It publishes high-quality clinical, translational, and basic science research on cancer prevention, initiation, progression, and treatment, as well as other related topics, particularly to capture the most seminal studies in the rapidly growing area of immunology, immunotherapy, and tumor microenvironment.

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