

Is Neoadjuvant Chemotherapy a Standard Technique Cancer?

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Editorial Note

Recently, three pivotal papers respectively Non-Muscle Invasive Bladder Cancer, Neoadjuvant Chemotherapy in Oral Cavity SCC and Triple-Negative Breast Cancer with Neoadjuvant Chemotherapy (NACT) is published in the European Journal of Clinical Oncology which contains lot of knowledge and experience. In these papers author gave their theoretical and practical both experience that is very interesting for readers and knowledgeable. The title "Treatment of Large Non-Muscle Invasive Bladder Cancer: The Potential Role of Neo-Adjuvant Intravesical Chemotherapy" author wrote a note that is very interesting and useful for the readers and as well as in the field of clinical science. I am going to tell little bit about bladder cancer, bladder cancer is any of several types of cancer arising from the tissues of the urinary bladder Symptoms include blood in the urine, pain with urination, and low back pain. Some risk factors are responsible for this bladder cancer include smoking, family history, prior radiation therapy, frequent bladder infections, and exposure to certain chemicals. In this paper author has directly mentioned about the risk factor of bladder cancer and how it will be become in a form of tumour. Most of these large bladder cancers pose a significant risk for tumor recurrence and progression. In these cases of large, high risk and hardly respectable tumors, there are well supported reasons to offer

immediate radical cystectomy. However, in some patients this invasive treatment may not be feasible because of advanced age, comorbidities, and patients' refusal. Therefore, similarly to other tumors, we considered applying neoadjuvant chemo-resection to reduce the tumor size before surgical treatment. According to me as a researcher, I am suggesting to all my readers read carefully and gain more knowledge from this journal. And the second paper is research paper that is very useful in that author gave almost data from their work and he wants to spread his knowledge and his experiences, I am showing interest in his article; Oral Squamous Cell Carcinoma (OSCC) is a common malignant head and neck tumor. The mainstay treatment of OSCC is surgery-centered multimodality therapy. Reconstructive surgery is always needed to restore the oral function after ablative surgery. Role of NACT in the treatment of head and neck cancer is still controversial. In this study, we retrospectively reviewed a group of patients with locally advanced but resectable OSCC in a single cancer center. He worked on numbers of patients and gave a data regarding this research. He wrote this research paper in a good way and paper has contains lot of knowledge. And the 3rd one paper is related to chemotherapy in triple negative breast cancer is most common and wanted topic in this era. Some text I am here copying from the original paper. While decision making and treatment recommendations regarding adjuvant or neoadjuvant chemotherapy for young, healthy women with early-stage Triple-Negative Breast Cancer (TNBC) can be supported by established national guidelines and data from randomized controlled trials (RCTs), the same decision making when encountered in older women can often be significantly more complicated and nuanced. This is all about this issue and hope you all will enjoy after reading these papers. Every time I feel gratitude when I worked with European Journal of Clinical Oncology and I am thankful that they give me this opportunity to write something about this. I am requesting and suggesting to all researchers related to Oncology, kindly once visit home page of this journal and try to collaborate with this journal. Once again thank you to all and thank you to our colleague who gave me this opportunity.