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The growing role of Personalized and Precision Medicine (PPM): finding the right balance between precision medicine and personalized care to drive Personalized & Precision Oncology (PPO) adoption and to get cancer cured

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A new systems approach to diseased states and wellness result in a new branch in the healthcare services, namely, personalized and precision medicine (PPM). To achieve the implementation of PM concept, it is necessary to create a fundamentally new strategy based upon the subclinical recognition of biomarkers (bio predictors) of hidden abnormalities long before the disease clinically manifests itself. It would be extremely useful to integrate data harvesting from different databanks for applications such as prediction and personalization of further treatment to thus provide more tailored measures for the patients resulting in improved patient outcomes, reduced adverse events, and more cost effective use of health care resources. Individualizing patient treatment is a core objective of the medical field. Meanwhile, the inherent variability of cancer illustrating the molecular differences between tumors, securing the linkages of those differences to an effective drug and resulting in immense patient benefits, lends itself to the growing field of PPM. Personalized cancer treatment in particular stands to highly benefit from PPM therapies, since extensive variability between tumors presents a need to target each case in a personalized manner. At this point, personalized cancer therapy is considered to be a treatment strategy centered on the ability to predict which patients are more likely to respond to specific cancer therapies. This approach is founded upon the idea that cancer biomarkers are associated with patient prognosis and tumor response to therapy. And personalized tumor molecular profiles (tumor biomarkers can be OMICS-profiles that predict therapy response) tumor disease site and other patient characteristics are then potentially used for determining optimum individualized therapy options. We are entering an era of rapidly evolving transformation in translational cancer research as it relates to PPM-related practice, and a shifting paradigm of standardized health care in which detailed molecular information regarding a patient's cancer is being used for individualized treatments. PPO describes a diverse set of strategies in cancer medicine tailored to the unique biology of a patient's disease. And strategies range from the use of targeted and/or smart therapies to the use of data from genomic profiling to select treatments independent of cancer type, and hence go beyond traditional organ-based oncology. Patients, healthcare systems, and economies all stand to benefit. Meanwhile, a lack of medical guidelines has been identified by the majority of responders as the predominant barrier for adoption, indicating a need for the development of best practices and guidelines to support the implementation of PPM!. Implementation of PPM and PPO, in particular, require a lot before the current model "physician-patient" could be gradually displaced by a new model "medical advisor-healthy person-at-risk". This is the reason for developing global scientific, clinical, social, and educational projects in the area of PPM to elicit the content of the new branch.

Biography

Sergey Suchkov was born in the City of Astrakhan, Russia. In 1980, graduated from Astrakhan State Medical University and was awarded with MD. In 1985, maintained his PhD at the I.M. Sechenov Moscow Medical Academy and Inst of Med Enzymology. In 2001, and then his Doctor Degree at the Nat Inst of Immunology in Russia. From 1989 through 1995, was being a Head of the Lab of Clin Immunology, Helmholtz Eye Research Inst in Moscow. From 1995 through 2004 - a Chair of the Dept. for Clin Immunology, Moscow Clin Research Institute (MONIKI). In 1993-1996, was a Secretary-in-Chief of the Editorial Board, Biomedical Science, an international journal published jointly by the USSR Academy of Sciences and the Royal Society of Chemistry, UK.

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