

## Journal of Cancer Clinical Trials Volume 3, Issue 1

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### Editor's Note

Cancer is one of the leading causes of mortality worldwide. Developing mechanisms for wide screening, early detection, accurate diagnosis and efficient treatment are thus essential. Clinical trials are fundamental for developing effective treatment strategies. Journal of Cancer Clinical Trials articulates latest information and outcomes pertaining to the clinical trials focussed on various forms of cancer. The current issue covers a review study on acute lymphocytic leukaemia, a review study on different forms of Kaposi's sarcoma, a case report of glioblastoma and a review study on therapeutic approaches for human papilloma virus associated head and neck squamous cell carcinomas. Acute lymphocytic leukaemia represents a cancerous growth from lymphocytes in the bone marrow. The bone marrow of the affected patients is unable to produce adequate blood cells and hence such individuals are more susceptible to anaemia, bruising, bleeding, and recurrent infections. Ohsumi [1] reviewed the prevalence, the time line of new cases, associated mortality, the most susceptible age groups, various risk factors, symptoms, diagnostic tests, treatment strategies, drugs and alternative medicines with respect to acute lymphocytic leukaemia. Kaposi's sarcoma represents lesions in the skin, lymph nodes and mucous membranes. In most of the cases, human herpes virus was found to be associated with cancer lesions. The condition is quite prevalent in individuals with immune deficiencies such as human immunodeficiency virus infection and acquired immune deficiency syndrome, so much so that Kaposi's sarcoma was regarded as one of the acquired immune deficiency syndrome defining illnesses. Kuznetsov [2] reviewed different forms of Kaposi's sarcoma, the associated symptoms and causes. Glioblastoma is the most common form of malignant brain tumor. Cavernoma represents cerebral cavernous venous malformations with specific appearance in magnetic resonance imaging. Based on a case report of a patient with glioblastoma, Priscilla et al. [3], demonstrated the signal

characteristics of the central nervous system cavernoma using various magnetic resonance sequences. The prevalence of human papilloma virus associated head and neck squamous cell carcinomas has been increasing substantially. These cancers are treated using aggressive multi-modal therapy, which may result in morbidity. Hence, efforts are underway to de-escalate the therapy for such carcinomas. Cyndromatosis refers to a condition causing multiple benign tumors called cylindromas. Recently, defects in the cylindromatosis and tumour necrosis factor receptor associated factor 3 genes have been found to be associated with approximately 30% of human papilloma virus associated head and neck squamous cell carcinomas. Based on a review study, Issaeva et al. [4], observed that determination of mutation status and strategies to induce Interferon or inhibit nuclear factor kappa light chain enhancer of activated B cells may be potential new therapeutic approaches. The current issue of significance in developing approaches for management of various types of cancers including acute lymphocytic leukaemia, Kaposi sarcomas, glioblastoma and human papilloma virus associated head and neck squamous cell carcinomas.

### References

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