Editorial
Volume 11:04, 2022

Journal of Integrative Oncology

ISSN: 2329-6771 Open Access

A Short Note on Li-Fraumeni Syndrome Genetic Diseases

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Editorial

Li-Fraumeni syndrome and hereditary retinoblastoma are two rare genetic diseases that enhance the risk of bone cancer in families. Paget's disease is an affliction of the bones. Paget's disease of the bone, which affects the elderly the most, puts you at risk for bone cancer later in life. The most frequent type of bone cancer is osteosarcoma. The malignant cells in this tumour generate bone. In children and adolescents, this kind of bone cancer more commonly attacks the bones of the leg or arm. Osteosarcomas can arise outside of the bones in rare cases. The second most frequent type of bone cancer is chondrosarcoma. The malignant cells in this tumour create cartilage. Chondrosarcoma most commonly occurs in middle-aged and older persons' pelvis, legs, or arms. Osteosarcoma is more common in children who have a family history of retinoblastoma, an eye cancer. Osteosarcoma is more common in people with a sarcoma family history, such as individuals with Li-Fraumeni syndrome. Researchers are figuring out which genes run in families and put them at a higher risk of acquiring osteosarcoma than the general population.

All of these illnesses are relatively uncommon. Any factor that increases your chances of having an illness like cancer is referred to as a risk factor. Different malignancies have different risk factors. For example, smoking is a controllable risk factor. Others, such as a person's age or family history, are unchangeable. However, just because you have a risk factor, or even numerous risk factors, does not mean you will get the disease. Many people who have one or more risk factors never get cancer, whereas others who have few or no known risk factors do. Primary bone malignancies (bone cancers) come in a variety of shapes and sizes, and while they share some traits, they don't all have the same risk factors. Bone sarcoma is more likely to develop at the radiation therapy site in people who have had radiation therapy for causes other than bone malignancy.

Others, such as a person's age or family history, are unchangeable. However, just because you have a risk factor, or even numerous risk factors, does not mean you will get the disease. Many people who have one or more risk factors never get cancer, whereas others who have few or no known risk factors do. Primary bone malignancies (bone cancers) come in a variety of shapes and sizes, and while they share some traits, they don't all have the same risk factors. Bone sarcoma is more likely to develop at the radiation therapy site in people who have had radiation therapy for causes other than bone malignanc. This category includes people with Li-Fraumeni syndrome, retinoblastoma, and other inherited sarcoma risk factors. For more information about your personal cancer risk, speak with your health-care team. Despite this, the vast majority of bone sarcoma patients have no established risk factors [1-5].

Conflict of Interest

None.

References

1. Swaminathan, Mahesh, Sarah A. Bannon, Mark Routbort and Kiran Naqvi, et al. "Hematologic malignancies and Li–Fraumeni syndrome." *Mole Case Stud* 5 (2019): a003210.
2. Orr, Brent A., Michael R. Clay, Emilia M. Pinto and Chimene Kesserwan. "An update on the central nervous system manifestations of Li–Fraumeni syndrome." *Acta Neuropathol* 139 (2020): 669-687.
3. Consul, Nikita, Behrang Amini, Juan Jose Ibarra-Rovira and Katherine J. Blair, et al. "Li-Fraumeni syndrome and whole-body MRI screening: screening guidelines, imaging features, and impact on patient management." *Am J Roentgenol* 216 (2021): 252-263.
4. Prejac, Juraj, Natalija Dedić Plavetić, Kristina Gotovac Jerčić and Fran Borovečki. "A first report of a rare TP53 variant associated with Li-Fraumeni syndrome manifesting as invasive breast cancer and malignant solitary fibrous tumor." *World J Surg Oncol* 19 (2021): 1-6.
5. Siegel, Atara, Renee C. Bremer, William MP Klein and Sharon A. Savage, et al. "Uptake and timing of bilateral and contralateral risk-reducing mastectomy in women with Li–Fraumeni syndrome." *Breast Cancer Res Treat* 191 (2022): 159-167.

How to cite this article: Richard, Albert. "A Short Note on Li-Fraumeni Syndrome Genetic Diseases." J Integr Oncol 11 (2022): 374.

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Received: 01 April, 2022, Manuscript No. jio-22-67200; **Editor assigned:** 04 April, 2022, PreQC No. P-67200; **Reviewed:** 16 April, 2022, QC No. Q-67200; **Revised:** 22 April, 2022, Manuscript No. R-67200; **Published:** 30 April, 2022, DOI: 10.37421/2329-6771.2022.11.374