Editorial

Cancer Epidemiology, Biomarkers & Prevention, and Cancer Prevention Research: Two Journals, a Common Goal

Timothy R. Rebbeck,1,2 Powel H. Brown,4 Ernest T. Hawk,5 Caryn Lerman,2,3 Electra D. Paskett,7 Thomas A. Sellers,8 and Scott M. Lippman5,6 for the CEBP
Senior Editors and CaPR Deputy and Senior Editors

1Center for Clinical Epidemiology and Biostatistics, Abramson Cancer Center, University of Pennsylvania, Philadelphia, Pennsylvania; 2Department, Baylor College of Medicine, Houston, Texas; and Departments of 3Clinical Cancer Prevention and 4Thoracic/Head and Neck Medical Oncology, The University of Texas M. D. Anderson Cancer Center, Houston, Texas; 5College of Public Health and Comprehensive Cancer Center, The Ohio State University, Columbus, Ohio; and 6Moffitt Cancer Center and Research Institute, Tampa, Florida

Introduction

Prevention and control are key components of cancer research and the effort to reduce cancer incidence and mortality. The National Cancer Policy Board of the Institute of Medicine and National Research Council (1) stated that a national strategy for cancer prevention and control (CPC) should be a central focus of cancer research. The American Association for Cancer Research (AACR) and other national or international organizations also have devoted substantial resources to the advancement of cancer prevention as a national and worldwide health priority. The National Cancer Institute has led the movement to promote CPC research by mandating a strong CPC program as a key component of a National Cancer Institute-designated “comprehensive cancer center.” As a result, academic institutions across the country have bolstered their CPC programs.

The substantial commitment of the AACR to CPC includes its International Conference on Frontiers in Cancer Prevention Research, which has become a major venue for presenting cutting-edge research in basic, clinical, epidemiologic, and behavioral science related to CPC. This conference fosters important interdisciplinary interactions that are vital to making critical discoveries in this field. In addition, the AACR has long published several journals, including Cancer Epidemiology, Biomarkers & Prevention (CEBP), that have focused on CPC research. Further, to emphasize the importance of AACR CPC activities and research, the AACR’s launched the Cancer Prevention Journals Portal,9 an online journal featuring CPC articles published under the auspices of the AACR.

In recognition of the accomplishments, maturity, and promise of CPC in the 21st century, AACR expanded its publications portfolio in mid-2008 by founding a new journal, Cancer Prevention Research (CaPR). Paralleling the expansion of academic CPC programs, CaPR expands these activities of the AACR. CaPR complements, rather than competes with, CEBP in helping AACR to expand the horizons of CPC. The focus of this editorial is to outline the distinctions between the two journals to guide the academic community in submitting work and reading about specialized CPC interests and to emphasize the complementary and cooperative relationship between CEBP and CaPR.

Maintaining Two Distinct, Robust Journals

The publication of high-quality research in CPC is a main focus of the AACR, which publishes several journals that devote space to this field. Both the AACR and editorial leaders of CEBP and CaPR are committed to maintaining the distinct identity of CEBP and creating a new, distinct identity for CaPR. These identities inform the contents of each journal. Each journal will play a robust role in publishing the latest and best cancer prevention work that fits within the scope of its distinct identity. Certain areas of focus of CEBP and CaPR have little overlap (Fig. 1). As with many other dynamic, viable, and complex operations, however, there are potential overlaps which in this case represent research that may be published in either CEBP or CaPR; these overlaps provide complementary

9http://preventionportal.aacrjournals.org
CEBP publishes original research on biomarkers, screening and early detection, life-style, behavior, survivorship, supportive and palliative care, risk factors, risk assessment, and health disparities prevalent conditions, cancer, and cancer outcomes including survivorship. These studies are presented mainly in the context of epidemiologic or behavioral studies and interventions of healthy populations. Particular attention will be given to the identification of factors associated with various aspects of the carcinogenic process, including genetic susceptibility, host factors, infectious agents, chemical and physical carcinogens, environmental contaminants, dietary components, and life-style or behavioral factors such as tobacco use, energy balance, and sun exposure. Besides welcoming manuscripts that address individual subjects in any of the relevant disciplines, the Editors encourage the submission of manuscripts with an interdisciplinary or transdisciplinary approach. CEBP articles will focus on the following topics (Fig. 1):

- Biomarkers including assay development, validation, and application.
- Screening and early detection research as well as clinical and population applications of these interventions.
- Risk behaviors and life-style factors including tobacco use and smoking, dietary exposures, nutrition, energy balance, obesity, physical activity, sun exposure, and alcohol use.
- Risk factors and risk assessment.
- Occupational exposures including those determined by questionnaires and biomarkers.
- Behavioral science including behavioral interventions tested in randomized trials involving screening, behavior modification, risk behaviors, and life-style factors.
- Determinants of early detection, screening, and prevention behaviors (e.g., diet, physical activity, sun exposure).
- Interventions to increase adherence to early detection, screening, and prevention behaviors.
- Determinants of informed and shared decision making where the evidence for benefit is uncertain (e.g., prostate cancer testing, genetic testing) or where there are choices among treatment options as well as interventions to promote informed and shared decision making.
- Survivorship, quality of life, and supportive and palliative care in observational studies, as well as prevention cohorts and the interventions they receive.
- Translational studies of exposure and risk reduction in observational studies as well as prevention cohorts.
- Analytic methods development for epidemiologic, genetic epidemiologic, and molecular epidemiologic studies.
- Dissemination of prevention research of all kinds to relevant communities.
- Determinants and distribution of health disparities as well as interventions designed to address disparities.

Figure 1. Continuum of research areas covered by CEBP and CaPR. The vertical strip of color behind the list of topic areas represents a litmus test. For example, the topic “epidemiologic and biostatistical methods” turns the strip blue for purely CEBP, “mechanisms of carcinogenesis” turns it green for purely CaPR, and “biomarker science” turns it blue-green for a topic that could fit CEBP or CaPR.
CaPR is devoted to the basic science and mechanisms of carcinogenesis in preclinical and clinical models and to their translational development into clinically useful tools for cancer risk assessment, screening, early detection, and prevention. This journal is a primary resource for original articles, scholarly reviews, and timely, novel perspectives from noted authorities on all aspects of research and practice confronting the basic, translational, and clinical science community working to make cancer prevention an increasingly compelling clinical option. The major topic areas for these articles are oncogenesis, clinical cancer risk and early detection research, and chemoprevention and other preventive interventions including the basic science behind them. Particular attention is given to the following topics, especially in the context of experimental preclinical and clinical studies (Fig. 1):

- Biological basis of environmental, genetic, and infection-related carcinogenesis.
- Preclinical (animal, in vitro) models for cancer risk, development, and prevention.
- Mechanistic and molecular studies of risk and risk reduction using life-style modification of nutrition and tobacco as well as environmental exposures.
- Developing and testing models for risk assessment, screening, early detection, and response assessment; these models include biospecimen- and image-based approaches and can use various data sources to make them user friendly for patients and providers by enhancing the quantification of risk and short- and long-term preventive responses/outcomes.
- Development and progression of intraepithelial neoplasia.
- Natural and synthetic interventions and their mechanisms and targets.
- Primary and important secondary/correlative preventive studies nested within phase I to IV clinical trials.
- Preclinical and clinical studies with a special emphasis on mechanistic and/or translational research.
- Translational and clinical studies of exposure reduction to reduce cancer risk, including pharmacologic intervention studies.
- Pharmacogenetic studies of preventive interventions, including chemoprevention trials.

Guidance for Prevention Research Authors

Based on the individual journal descriptions provided above, the focus of CEBP includes studies in epidemiology, molecular and genetic epidemiology, survivorship, life-style and risk factors, and behavioral science. The primary domain of CaPR includes preclinical and clinical prevention research (Fig. 1). More subtle distinctions and possible areas of overlap between the two journals involve biomarker science, interventions, and early detection and screening. Authors will continue to make choices about the most appropriate journal in which to publish their research, and inevitably, there will be some overlap of interests between the two journals we discuss here. This overlap, however, will be carefully monitored by the editorial leaders of CEBP, CaPR, and AACR to ensure that it does not dilute the identity or scope of either journal. CPC research already is an enormous, ever-expanding field of study. Just as the world at large accepts news and commentary from several robust, viable commercial and noncommercial media outlets, the world of CPC is large enough to encompass CEBP and CaPR, two journals devoted to its documentation and advance. With a pledge to serve the interests of CPC science, the authors of this commentary (who include the Editors of CEBP or CaPR) invite readers and contributors to witness the unfolding progress and promise of CPC and its many subdisciplines across the pages of CEBP and CaPR long into the future.

Disclosure of Potential Conflicts of Interest

No potential conflicts of interest were disclosed.

Reference

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