# **Instructions for Authors 2021**

General Policy. ANTICANCER RESEARCH (AR) will accept original high quality works and reviews on all aspects of experimental and clinical cancer research. The Editorial Policy suggests that priority will be given to papers advancing the understanding of cancer causation, and to papers applying the results of basic research to cancer diagnosis, prognosis, and therapy. Each article should include a concrete conclusion constituting of a "new piece of knowledge" backed up by scientific evidence. AR will also accept the following for publication: (a) Abstracts and Proceedings of scientific meetings on cancer, following consideration and approval by the Editorial Board; (b) Announcements of meetings related to cancer research; (c) Short reviews (of approximately 120 words) and announcements of newly received books and journals related to cancer, and (d) Announcements of awards and prizes.

The principal aim of AR is to provide prompt publication (print and online) for original works of high quality, generally within 1-2 months from final acceptance. Manuscripts will be accepted on the understanding that they report original unpublished works in the field of cancer research that are not under consideration for publication by another journal, and that they will not be published again in the same form. All authors should sign a submission letter confirming the approval of their article contents. All material submitted to AR will be subject to peer-review, when appropriate, by two members of the Editorial Board and by one suitable outside referee. All manuscripts submitted to AR are urgently treated with absolute confidence, with access restricted to the Managing Editor, the journal's secretary, the reviewers and the printers. The Editors reserve the right to improve manuscripts on grammar and style.

The Editors and Publishers of AR accept no responsibility for the contents and opinions expressed by the contributors. Authors should warrant due diligence in the creation and issuance of their work.

**NIH Open Access Policy.** The journal acknowledges that authors of NIH-funded research retain the right to provide a copy of the published manuscript to the NIH four months after publication in ANTICANCER RESEARCH, for public archiving in PubMed Central.

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**Format.** Two types of papers may be submitted: (i) Full papers containing completed original work, and (ii) review articles concerning fields of recognisable progress. Papers should contain all essential data in order to make the presentation clear. Reasonable economy should be exercised with respect to the number of tables and illustrations used. Papers should be written in clear, concise English. Spelling should follow that given in the "Shorter Oxford English Dictionary".

Manuscripts. Submitted manuscripts exceeding 4 printed pages will be subject to excess page charges. The 4 printed pages correspond approximately to twelve (12) document pages (~250 words per double-spaced typed page in Arial 12), including abstract, text, tables, figures, and references. All manuscripts should be divided into the following sections: (a) First page including the title of the presented work [not exceeding fifteen (15) words], full names and full postal addresses of all Authors, name of the Author to whom proofs are to be sent, key words, an abbreviated running title, an indication "review", "clinical", "epidemiological", or "experimental" study, and the date of submission. (Note: The order of the Authors is not necessarily indicative of their contribution to the work. Authors may note their individual contribution(s) in the appropriate section(s) of the presented work); (b) Abstract not exceeding 150 words, organized according to the following headings: Background/Aim – Materials and Methods/Patients and Methods – Results – Conclusion; (c) Introduction; (d) Materials and Methods/Patients and Methods; (e) Results; (f) Discussion; (g) Conflicts of Interest; (h) Authors' contributions; (i) Acknowledgements; (j) References. All pages must be numbered consecutively. Footnotes should be avoided. Review articles may follow a different style according to the subject matter and the Author's opinion. Review articles should not exceed 35 pages (approximately 250 words per double-spaced typed page) including all tables, figures, and references.

**Figures.** All figures should appear at the end of the submitted document file. Once a manuscript is accepted all figures and graphs should be submitted separately in either jpg, tiff or pdf format and at a minimum resolution of 300 dpi. Graphs must be submitted as pictures made from drawings and must not require any artwork, typesetting, or size modifications. Symbols, numbering and lettering should be clearly legible. The number and top of each figure must be indicated. Pages that include color figures are subject to color charges..

**Tables.** All tables should appear at the end of the submitted document file. Once a manuscript is accepted, each table should be submitted separately, typed double-spaced. Tables should be numbered with Roman numerals and should include a short title.

**References.** Authors must assume responsibility for the accuracy of the references used. Citations for the reference sections of submitted works should follow the form below and must be numbered consecutively. In the text, references should be cited by number in parenthesis. Examples: 1 Kenyon J, Liu W and Dalgleish A: Report of objective clinical responses of cancer patients to pharmaceutical-grade synthetic cannabidiol. Anticancer Res 38(10): 5831-5835, 2018. PMID: 30275207. DOI: 10.21873/anticanres.12924. (PMIDs and DOIs only if applicable). 2 McGuire WL and Chamnes GC: Studies on the oestrogen receptor in breast cancer. In: Receptors for Reproductive Hormones. O' Malley BW, Chamnes GC (eds.). New York, Plenum Publ Corp., pp 113-136, 1973. 3 Global Health Estimates 2015: Disease Burden by Cause, Age, Sex, by Country and by Region,

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2000-2015. Geneva, World Health Organisation, 2016. Available at http://www.who.int/healthinfo/global\_burden\_disease/estimates/en/index2.html. Last accessed on 3rd April 2018. (The web address should link directly to the cited information and not to a generic webpage).

Nomenclature and Abbreviations. Nomenclature should follow that given in "Chemical Abstracts", "Index Medicus", "Merck Index", "IUPAC -IUB", "Bergey's Manual of Determinative Bacteriology", The CBE Manual for Authors, Editors and Publishers (6th edition, 1994), and MIAME Standard for Microarray Data. Human gene symbols may be obtained from the HUGO Gene Nomenclature Committee (HGNC) (http://www.gene.ucl.ac.uk/). Approved mouse nomenclature may be obtained from http://www.informatics.jax.org/. Standard abbreviations are preferable. If a new abbreviation is used, it must be defined on first usage.

Clinical Trials. Authors of manuscripts describing clinical trials should provide the appropriate clinical trial number in the correct format in the text.

For International Standard Randomised Controlled Trials (ISRCTN) Registry (a not-for-profit organization whose registry is administered by Current Controlled Trials Ltd.) the unique number must be provided in this format: ISRCTNXXXXXXXX (where XXXXXXXX represents the unique number, always prefixed by "ISRCTN"). Please note that there is no space between the prefix "ISRCTN" and the number. Example: ISRCTN47956475.

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## Specific information and additional instructions for Authors

- 1. Anticancer Research (AR) closely follows the new developments in all fields of experimental and clinical cancer research by (a) inviting reviews on topics of immediate importance and substantial progress in the last three years, and (b) providing the highest priority for rapid publication to manuscripts presenting original results judged to be of exceptional value. Theoretical papers will only be considered and accepted if they bear a significant impact or formulate existing knowledge for the benefit of research progress.
- 2. Anticancer Research will consider the publication of conference proceedings and/or abstracts provided that the material submitted fulfils the quality requirements and instructions of the journal, following the regular review process by two suitable referees.
- 3. An acknowledgement of receipt, including the article number, title and date of receipt is sent to the corresponding author of each manuscript upon receipt. If this receipt is not received within 20 days from submission, the author should call or write to the Editorial Office to ensure that the manuscript (or the receipt) was not lost in the mail or during electronic submission.
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- 5. All accepted manuscripts are carefully corrected in style and language, if necessary, to make presentation clear. (There is no fee for this service). Every effort is made (a) to maintain the personal style of the author's writing and (b) to avoid change of meaning. Authors will be requested to examine carefully manuscripts which have undergone language correction at the pre-proof or proof stage.
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  - Figures (graphs or photographs) should be prepared at a width of 8 or 17 cm with legible numbers and lettering.
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(This text is a combination of advice and suggestions contributed by Editors, Authors, Readers and the Managing Editor of AR).

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- IN VIVO is a multidisciplinary journal designed to bring together original high quality works and reviews on experimental and clinical biomedical research within the frames of human physiology, pathology and disease management. A special focus of the journal is the publication of works on: (a) Experimental development and application of new diagnostic procedures; (b) Pharmacological and toxicological evaluation of new drugs and drug combinations; (c) Clinical trials; (d) Development and characterization of models of biomedical research.
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## Selection of Recent Articles

Sutureless Surgical Orthotopic Implantation Technique of Primary and Metastatic Cancer in the Liver of Mouse Models. H. NISHINO, H.M. HOLLANDSWORTH, N. SUGISAWA, J. YAMAMOTO, Y. TASHIRO, S. INUBUSHI, K. HAMADA, Y. SUN, H. LIM, S. AMIRFAKHRI, F. FILEMONI, R.M. HOFFMAN, M. BOUVET (San Diego, CA, USA; Kyoto, Japan)

Hip Arthroplasty Following Subtotal Sacrectomy for Chordoma. M.R. CLAXTON, M.B. SHIRLEY, J.D. JOHNSON, K.I. PERRY, P.S. ROSE, M.T. HOUDEK (Rochester, MN, USA)

SMN Protein Contributes to Skeletal Muscle Cell Maturation *Via* Caspase-3 and Akt Activation. S. ANDO, M. TANAKA, N. CHINEN, S. NAKAMURA, M. SHIMAZAWA, H. HARA (*Gifu*, *Japan*)

Comparison of TMA Technique and Routine Whole Slide Analysis in Evaluation of Proliferative Markers Expression in Laryngeal Squamous Cell Cancer. U. CIESIELSKA, A. PIOTROWSKA, C. KOBIERZYCKI, W. PASTUSZEWSKI, M. PODHORSKA-OKOLOW, P. DZIEGIEL, K. NOWINSKA (Wroclaw, Poland; Namsos, Norway)

Leucocyte Count Does Not Improve the Diagnostic Performance of a Diagnostic Score (DS) in Distinguishing Acute Appendicitis (AA) from Nonspecific Abdominal Pain (NSAP). J. MEKLIN, M. ESKELINEN, K. SYRJANEN, M. ESKELINEN (Kuopio; Kaarina, Finland; Barretos, Brazil)

Evaluating the Decision-to-Delivery Interval in Emergency Cesarean Sections and its Impact on Neonatal Outcome. J.-A. BRANDT, B. MORGENSTERN, F. THANGARAJAH, B. GRÜTTNER, S. LUDWIG, C. EICHLER, J. RATIU, P. MALLMANN, D. RATIU (Cologne, Germany)

Cutaneous Stomal Recurrence of Colorectal Cancer After Curative Rectal Cancer Surgery – A Case Report and Systematic Review. S. DAVEY, K. MCCARTHY (*Bristol, UK*)

Knockout of TRPV1 Exacerbates Ischemia-reperfusion-induced Renal Inflammation and Injury in Obese Mice. B. ZHONG, S. MA, D.H. WANG (East Lansing, MI, USA)

In Vitro and In Vivo Biocompatibility Analysis of a New Transparent Collagen-based Wound Membrane for Tissue Regeneration in Different Clinical Indications. O. JUNG, M. RADENKOVIC, S. STOJANOVIĆ, C. LINDNER, M. BATINIC, O. GÖRKE, J. PISSAREK, A. PRÖHL, S. NAJMAN, M. BARBECK (Rostock; Berlin, Germany; Niš, Serbia)

Hepatocellular Carcinoma-associated microRNAs Induced by Hepatoma-derived Growth Factor Stimulation. H. ENOMOTO, H. NAKAMURA, H. NISHIKAWA, T. NISHIMURA, Y. IWATA, S. NISHIGUCHI, H. IIJIMA (Hyogo; Osaka, Japan)

An Improved Encapsulation Method for Cryopreserving Hepatocytes for Functional Transplantation Using a Thermo-reversible Gelation Polymer. K. YAMADA, T. AOKI, Y. ENAMI, Y. TASHIRO, Z. ZEHAOU, T. KOIZUMI, T. KUSANO, K. MATSUDA, Y. WADA, H. SHIBATA, K. TOMIOKA, K. SIRIRATSIVAWONG, R.M. HOFFMAN, M. MURAKAMI (Tokyo, Japan; San Diego, CA, USA)

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# Selection of Recent Articles

Micro RNAs Promoting Growth and Metastasis in Preclinical *In Vivo* Models of Subcutaneous Melanoma. U.H. WEIDLE, S. AUSLÄNDER, U. BRINKMANN (*Penzberg*, *Germany*)

Differential Proteomic Analysis of Hepatocellular Carcinomas from *Ppp2r5d* Knockout Mice and Normal (Knockout) Livers. C. LAMBRECHT, G.B. FERREIRA, J.D. OMELLA, L. LIBBRECHT, R. DE VOS, R. DERUA, C. MATHIEU, L. OVERBERGH, E. WAELKENS, V. JANSSENS (*Leuven; Brussels, Belgium*)

Stem-like Cells from Invasive Breast Carcinoma Cell Line MDA-MB-231 Express a Distinct Set of Eph Receptors and Ephrin Ligands. M. LUCERO, J. THIND, J. SANDOVAL, S. SENAATI, B. JIMENEZ, R.P. KANDPAL (*Pomona, CA, USA*)

Circulating Tumor DNA in Biliary Tract Cancer: Current Evidence and Future Perspectives. A. RIZZO, A.D. RICCI, S. TAVOLARI, G. BRANDI (*Bologna, Italy*)

Whole-transcriptome Analysis of Fully Viable Energy Efficient Glycolytic-null Cancer Cells Established by Double Genetic Knockout of Lactate Dehydrogenase A/B or Glucose-6-Phosphate Isomerase. E. MAZZIO, R. BADISA, N. MACK, S. CASSIM, M. ZDRALEVIC, J. POUYSSEGUR, K.F.A. SOLIMAN (*Tallahassee*, *FL*, *USA*; *Monaco*, *Monaco*; *Nice*, *France*) TIP60/P400/H4K12ac Plays a Role as a Heterochromatin Back-up Skeleton in Breast Cancer. M. IDRISSOU, T. BOISNIER, A. SANCHEZ, F.Z.H. KHOUFAF, F. PENAULT-LLORCA, Y.-J. BIGNON, D. BERNARD-GALLON (*Clermont-Ferrand*, *France*)

STRA6 Expression Serves as a Prognostic Biomarker of Gastric Cancer. S. NAKAMURA, M. KANDA, D. SHIMIZU, K. SAWAKI, C. TANAKA, N. HATTORI, M. HAYASHI, S. YAMADA, G. NAKAYAMA, K. OMAE, M. KOIKE, Y. KODERA (*Nagoya; Fukushima, Japan*)

Expression Patterns of CD44 and AREG Under Treatment With Selective Tyrosine Kinase Inhibitors in HPV+ and HPV- Squamous Cell Carcinoma. B. KANSY, C. ADERHOLD, L. HUBER, S. LUDWIG, R. BIRK, A. LAMMERT, S. LANG, N. ROTTER, B. KRAMER (*Essen; Mannheim; Marburg, Germany*)

Chromobox 2 Expression Predicts Prognosis After Curative Resection of Oesophageal Squamous Cell Carcinoma. S. UEDA, M. KANDA, Y. SATO, H. BABA, S. NAKAMURA, K. SAWAKI, D. SHIMIZU, S. MOTOYAMA, T. FUJII, Y. KODERA, S. NOMOTO (*Nagoya; Akita; Toyama, Japan*)

Fusion of the Lumican (*LUM*) Gene With the Ubiquitin Specific Peptidase 6 (*USP6*) Gene in an Aneurysmal Bone Cyst Carrying a t(12;17)(q21;p13) Chromosome Translocation. I. PANAGOPOULOS, L. GORUNOVA, K. ANDERSEN, I. LOBMAIER, M. LUND-IVERSEN, F. MICCI, S. HEIM (*Oslo, Norway*)

Influence of Concurrent Mutations on Overall Survival in EGFR-mutated Non-small Cell Lung Cancer. M. CHEVALLIER, P. TSANTOULIS, A. ADDEO, A. FRIEDLAENDER (*Geneva*, *Switzerland*)

Long Noncoding RNA ANROC on the INK4 Locus Functions to Suppress Cell Proliferation. Y. KOTAKE, T. TSURUDA (Fukuoka, Japan)

The KDR (VEGFR-2) Genetic Polymorphism Q472H and c-KIT Polymorphism M541L Are Associated With More Aggressive Behaviour in Astrocytic Gliomas. N. ZAMAN, S.S. DASS, P.D. PARCQ, S. MACMAHON, L. GALLAGHER, L. THOMPSON, J.S. KHORASHAD, C. LIMBÄCK-STANIC (*London, UK*)

KIF15 Expression in Tumor-associated Monocytes Is a Prognostic Biomarker in Hepatocellular Carcinoma. A. KITAGAWA, T. MASUDA, J. TAKAHASHI, T. TOBO, M. NODA, Y. KURODA, Q. HU, Y. KOUYAMA, Y. KOBAYASHI, S. KURAMITSU, K. SATO, A. FUJII, Y. YOSHIKAWA, H. WAKIYAMA, D. SHIMIZU, Y. TSURUDA, H. EGUCHI, Y. DOKI, M. MORI, K. MIMORI (*Oita; Osaka; Fukuoka, Japan*)

Serum Soluble Interleukin-2 Receptor as a Potential Biomarker for Immune-related Adverse Events. R. TAKAI, Y. FUNAKOSHI, H. SUTO, Y. NAGATANI, Y. IMAMURA, M. TOYODA, K. YAKUSHIJIN, N. KIYOTA, KI. HARADA, K. YAMASHITA, Y. KAKEJI, H. MINAMI ( <i>Kobe, Japan</i> )
Clinical Outcome of the Patients With Brain Metastasis from Soft Tissue Sarcomas. T. TAKEMORI, T. KAWAMOTO, M. MORISHITA, H. HARA, N. FUKASE, Y. KAWAKAMI, S. FUJIWARA, K. KITAYAMA, S. YAHIRO, T. MIYAMOTO, T. FUJIMOTO, I. FUJITA, Y. MIFUNE, Y. HOSHINO, K. KAKUTANI, T. MATSUMOTO, T. MATSUSHITA, T. NIIKURA, R. KURODA, T. AKISUE ( <i>Kobe; Akashi, Japan</i> )
Discrepancy Between Clinical Diagnosis and Whole-exome Sequencing-based Clonality Analysis of Synchronous Multiple Oral Cancers. N. NISHII, Y. HIROTSU, N. KOIDA, Y. TAKAHASHI, Y. TAKAGAWA, K. AMEMIYA, T. OYAMA, H. MOCHIZUKI, E. FURUSAWA-NISHII, H. HARADA, M. OMATA (Yamanashi; Tokyo; Sendai, Japan)
Effectiveness of Salvage Knee Rotationplasty on Sarcoma Around the Knee in Adolescents and Young Adults. H. KINOSHITA, T. YONEMOTO, H. KAMODA, Y. HAGIWARA, T. TSUKANISHI, M. INOUE, F. TERAKAWA, S. OHTORI, T. ISHII ( <i>Chiba, Japan</i> )
A New Model to Improve the Prediction of Prognosis of Endometrial Carcinoma by Combining Traditional Classification With the Presence of Tumor-infiltrating Lymphocytes. M. MIYAMOTO, T. HADA, H. ISHIBASHI, H. IWAHASHI, S. KAKIMOTO, R. SUZUKI, T. SAKAMOTO, H. MATSUURA, H. TSUDA, M. TAKANO ( <i>Tokorozawa, Japan</i> )
Salvage Therapy After Regorafenib or Trifluridine/Tipiracil Treatment of Metastatic Colorectal Cancer: A Conditional Landmark Analysis. M. NAKASHIMA, M. TAKEUCHI, S. TANAKA, K. KAWAKAMI ( <i>Kyoto, Japan</i> )
Impact of the Relative Dose Intensity of Neoadjuvant Chemotherapy With Anthracycline Followed by Taxane on the Survival of Patients With Human Epidermal Growth Factor Receptor 2-negative Breast Cancer: The JONIE1 Study. A. YAMADA, K. NAKAZAWA, K. AKAZAWA, K. NARUI, I. ENDO, Y. HASEGAWA, N. KOHNO, T. ISHIKAWA, THE JONIE STUDY GROUP (Yokohama; Niigata; Hirosaki; Kobe; Tokyo, Japan)
Patient Age and Long-term Survival in Colorectal Cancer Patients Who Undergo Emergency Surgery. K. KOSUMI, K. MIMA, A. MORITO, S. YUMOTO, T. MATSUMOTO, M. INOUE, T. MIZUMOTO, T. KUBOTA, N. MIYANARI, H. BABA ( <i>Kumamoto, Japan</i> )
Clinical Significance of Past History of Breast Cancer Screening for the Prognosis of Triple Negative Breast Cancer. S. INOUE, H. KAWAIDA, R. SAITO, Y. NAKAYAMA, M. OHMORI, A. KIMURA, K. SHODA, S. FURUYA, N. HOSOMURA, H. AKAIKE, Y. KAWAGUCHI, H. AMEMIYA, M. SUDO, H. KONO, D. ICHIKAWA ( <i>Yamanashi</i> , <i>Japan</i> )
Clinical Applicability of the Proliferation Marker Thymidine Kinase 1 in Head and Neck Cancer Patients. A. MEIROVITZ, M. GROSS, V. LEIBOVICI, K. SHEVA, A. POPOVZER, V. BARAK ( <i>Jerusalem, Israel</i> )
BP180 Is a Prognostic Factor in Head and Neck Squamous Cell Carcinoma. X. MENG, F. MATSUMOTO, T. MORI, N. MIURA, Y. INO, K. ONIDANI, K. KOBAYASHI, Y. MATSUZAKI, S. YOSHIMOTO, K. IKEDA, K. HONDA ( <i>Tokyo, Japan; Shenyang, PR China</i> )
Prognostic Reappraisal of Postoperative Carcinoembryonic Antigen in T1-2N0 Colorectal Cancer. G. PIAN, J.S. SHIN, S. YOON, S.Y. OH (Suwon, Republic of Korea; Jilin, PR China)
ABSTRACTS OF THE 8 <sup>TH</sup> INTERNATIONAL CONFERENCE ON ADVANCES IN HEMATOLOGY AND ONCOLOGY (ICAHO2020), 26 September-17 October, 2020 (Seattle, WA, USA)

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