Instructions for Authors 2022

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 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.

AR provides for the prompt print and online publication of accepted articles, 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 Manuscripts will be accepted on the understanding that they report original unpublished works in the field of cancer research that are not under consideration for publication by another journal, and that they will not be published again in the same form.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.

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Format. Two types of papers may be submitted: (i) Full papers containing completed original work (without supplementary data), and (ii) review articles concerning fields of recognizable 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 or before the Acknowledgements); (b) Abstract not exceeding 250 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 (graphs and photographs). All figures should appear at the end of the submitted document file. Once a manuscript is accepted all figures 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. Figures should be prepared at a width of 8 or 17cm with eligible symbols, lettering and numbers. The number of each figure must be indicated. Pages that include color figures are subject to color charges.

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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.
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   - Authors should not cite results submitted for publication in the reference section. Such results may be described briefly in the text with a note in parenthesis (submitted for publication by… authors, year).
   - References. Each article should address, list and discuss the entire spectrum of current publications relevant to its field.
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Selection of Recent Articles


Profiling of Serum Extracellular Vesicles Reveals miRNA-4525 as a Potential Biomarker for Advanced Renal Cell Carcinoma. Y. MURAMATSU-MAEKAWA, K. KAWAKAMI, Y. FUJITA, M. TAKAI, D. KATO, K. NAKANE, T. KATO, T. TSUCHIYA, T. KOIE, Y. MIURA, M. ITO, K. MIZUTANI (Gifu; Tokyo, Japan)


Artesunate-induced Cellular Effects Are Mediated by Specific EPH Receptors and Ephrin Ligands in Breast Carcinoma Cells. T. ZADEH, M. LUCERO, R.P. KANDPAL (Pomona, CA, USA)

MicroRNAs Involved in Small-cell Lung Cancer as Possible Agents for Treatment and Identification of New Targets. U.H. WEIDLE, A. NOPORA (Penzberg, Germany)

Fusion of the Paired Box 3 (PAX3) and Myocardin (MYOCD) Genes in Pediatric Rhabdomyosarcoma. I. PANAGOPoulos, L. GORUNOVA, K. ANDERSEN, M. LUND-IVERSEN, S. TAFJORD, F. MICCI, S. HEIM (Oslo, Norway)

Delayed MRI Enhancement of Colorectal Cancer Liver Metastases Is Associated With Metastatic Mutational Profile. A. SETH, Y. AMEYMIYA, H. CHEUNG, E. HSIEH, C. LAW, L. MILOT (Toronto, ON, Canada)

Genetic Analysis in Anal and Cervical Cancer: Exploratory Findings About Radioreistance in the ProfiLER Database. E. ROWINSKI, N. MAGNE, W. BOULEFTOUR, P. MORENO-ACOSTA, C. DE LA FOURCHADIERE, I. RAY-COQUARD, Q. WANG, J.-Y. BLAY, O. TREDAN (Saint-Priest-en-Jarez; Lyon, France; Bogota, Colombia)

Cancer-associated Fibroblast-derived Spondin-2 Promotes Motility of Gastric Cancer Cells. S. KURAMITSU, T. MASUDA, Q. HU, T. TOBO, M. YASHIRO, A. FUJII, A. KITAGAWA, T. ABE, H. OTSU, S. ITO, E. OKI, M. MORI, K. KIMORI (Beppu; Fukuoka; Osaka, Japan)

OIP5-ASI Promotes Proliferation of Non-small-cell Lung Cancer and Head and Neck Squamous Cell Carcinoma Cells. Y. KOTAKE, N. MATSUNAGA, T. WAKASAKI, R. OKADA (Fukuoka, Japan)

Clear Cell Renal Carcinoma: MicroRNAs With Efficacy in Preclinical In Vivo Models. U.H. WEIDLE, A. NOPORA (Penzberg, Germany)

Metabolic Response to the Mitochondrial Toxin 1-Methyl-4-phenylpyridinium (MPP+) in LDH-A/B Double-knockout LS174T Colon Cancer Cells. N. MACK, E. MAZZIO, R. BADISA, K.F.A. SOLIMAN (Tallahassee, FL, USA)


Combination Methionine-methylation-axis Blockade: A Novel Approach to Target the Methionine Addiction of Cancer. T. HIGUCHI, Q. HAN, N. SUGISAWA, J. YAMAMOTO, N. YAMAMOTO, K. HAYASHI, H. KIMURA, S. MIWA, K. IGARASHI, M. BOUVE, S.R. SINGH, H. TSUCHIYA, R.M. HOFFMAN (San Diego, CA; Frederick, MD, USA; Kanazawa, Japan)
General Policy

CANCER DIAGNOSIS & PROGNOSIS (CDP) is an international online open-access bimonthly journal designed to bring together original high quality works and reviews on experimental and clinical research advancing knowledge on the diagnosis and prognosis of all types of human cancer, leukemia and metastasis. CDP is aiming at improving prompt disease management and quality of life of cancer patients through a precise early diagnosis and prognosis. CDP provides for the prompt online publication of accepted articles within 1-2 months from final acceptance.

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Selection of Recent Articles

Real-time IR700 Fluorescence Imaging During Near-infrared Photodynamic Therapy Using a Clinically-approved Camera for Indocyanine Green. S. OKUYAMA, D. FUJIMURA, F. INAGAKI, R. OKADA, Y. MARUOKA, H. WAKIYAMA, T. KATO, A. FURUSAWA, P.L. CHOYKE, H. KOBAYASHI (Kyoto, Japan; Bethesda, MD, USA)


Discordant PET Findings and a High Relapse Rate Characterize Hispanics With Hodgkin's Lymphoma Treated With ABVD. S. GAUR, A. PHILIPPOVSKYIY, U. ONYEDIKA, A.M. EIRING, A.K. DWIVEDI, A. ORAZI (El Paso, TX, USA)

Absolute Increase in the Number and Proportion of Peripheral Eosinophils Associated With Immune Checkpoint Inhibitor Treatment in Non-small Cell Lung Cancer Patients. H. OSAWA, T. SHIOZAWA, S. OKAUCHI, Y. SASATANI, G. OHARA, S. SATO, K. MIYAZAKI, T. KODAMA, K. KAGOHASHI, H. SATOH, N. HIZAWA (Tsukuba; Mito; Ryugasaki, Japan)

The Systemic Immune Markers at Diagnosis Can Predict the Survival Benefit in Advanced Breast Cancer. S. NAKAMOTO, M. IKEDA, S. KUBO, M. YAMAMOTO, T. YAMASHITA, C. KUWAHARA (Hiroshima, Japan)

Occurrence of Second Primary Malignancies in Patients With Primary Optic Nerve Gliomas: A Surveillance, Epidemiology, and End Results Analysis. Z. HUSSAIN, A. KHAN, A. SAEED, F. DIHOWM (Portland, ME; El Paso, TX, USA)

A Treatment-free Interval Allowed by Ponatinib as Fourth-line Therapy. A. BULLA, U. MARKOVIC, C. BELLOFIORE, S. STELLA, C. CONTICELLO, F. DI RAIMONDO, F. STAGNO (Catania, Italy)

Efficacy of Combination Chemotherapy With Docetaxel, Estramustine and Carboplatin in Men With Castration-resistant Prostate Cancer. K. HIKITA, M. HONDA, R. SHIMIZU, S. TERAOKA, B. KAWAMOTO, T. YUMIOKA, P. TSOUNAPI, H. IWAMOTO, S. MORIZANE, A. TAKENAKA (Tottori, Japan)

Cannabidiol May Prolong Survival in Patients With Glioblastoma Multiforme. R. LIKAR, M. KOESTENBERGER, M. STUTSCHNIG, G. NAHLER (Klagenfurt am Wörthersee; Graz; Vienna, Austria)


Improved Chemotherapy Outcomes of Patients With Small-cell Lung Cancer Treated With Combined Alkalization Therapy and Intravenous Vitamin C. R. HAMAGUCHI, R. NARUI, H. MORIKAWA, H. WADA (Kyoto, Japan)

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Silica Induced Lung Fibrosis Is Associated With Senescence, Fgr, and Recruitment of Bone Marrow Monocyte/Macrophages. A. MUKHERJEE, M.W. EPPERLY, R. FISHER, W. HOU, D. SHIELDS, H. WANG, J.S. GREENBERGER, L.A. ORTIZ (Pittsburgh, PA, USA)


Adaptive Membrane Fluidity Modulation: A Feedback Regulated Homeostatic System Hiding in Plain Sight. E. IZBICKA, R.T. STREEPER (San Antonio, TX, USA)

Comparison of Macro-and Micro-porosity of a Titanium Mesh for Guided Bone Regeneration: An In Vivo Experimental Study. M. SENOO, A. HASUIKE, T. YAMAMOTO, Y. OZAWA, N. WATANABE, M. FURUHATA, S. SATO (Tokyo, Japan)

Salmonella typhimurium A1-R Exquisitely Targets and Arrests a Matrix-producing Triple-negative Breast Carcinoma in a PDOX Model. K. HAMADA, Y. AOKI, J. YAMAMOTO, C. HOZUMI, M. ZHAO, T. MURATA, N. SUGISAWA, M. BOUVET, T. TSUNODA, R.M. HOFFMAN (San Diego, CA, USA; Tokyo; Narita; Okayama, Japan)

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Telomerase Reverse Transcriptase Promoter Mutations in Human Hepatobiliary, Pancreatic and Gastrointestinal Cancer Cell Lines. M. HIRATA, K. FUJITA et al. (Kagawa, Japan)

Robotic Total Pancreatectomy: A Narrative Review. K. TAKAGI, B.G. KOERKAMP (Okayama, Japan; Rotterdam, the Netherlands)

On the Origin of SARS-CoV-2: Did Cell Culture Experiments Lead to Increased Virulence of the Progenitor Virus for Humans? B. KAINA (Mainz, Germany)

Repeated 5-aminovalenic Acid Instillations During Follow-up in Non-muscle-invasive Bladder Cancer: A Randomized Study. E. KELLONIEMI, R. JÄRVINEN, P. HELSTRÖM, E. RINTALA, S. AALTO玛, T. ISOТАLO, K. INNOS, E. KAASINEN (Helsinki; Oulu; Kuopio; Lahti; Hyvinkää, Finland)

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