

Instructions for Authors 2023

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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 Manuscripts will be accepted on the understanding that they report original unpublished works in the field of cancer research that are not under consideration for publication by another journal, and that they will not be published again in the same form.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 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. Excess pages are charged US\$ 230.00 each. 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 (US\$350.00 per page).

Tables. All tables should appear at the end of the submitted document file. Each table may have 2-10 vertical columns. 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/anticancer.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, 2000-2015. Geneva, World Health Organisation, 2016. Available at: http://www.who.int/healthinfo/global_burden_disease/estimates/en/index2.html [Last accessed on April 3, 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.

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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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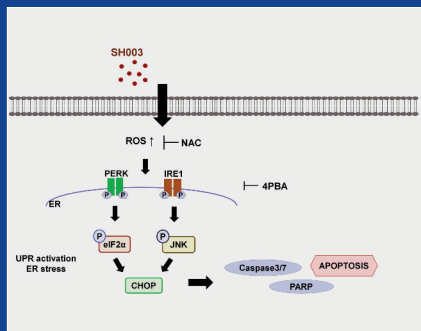
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1. Anticancer Research (AR) closely follows the new developments in all fields of experimental and clinical cancer research by (a) inviting reviews on topics of immediate importance and substantial progress in the last three years, and (b) providing 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.

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.
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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).
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 - they repeat results already published by the same or other authors before the submission to AR.
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General Policy

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(CGP) welcomes submissions of original high quality articles and reviews on all aspects of the application of genomic and proteomic technologies to experimental and clinical cancer research. The journal's scientific spectrum includes: (a) molecular causes of carcinogenesis, cancer progression and metastasis; (b) structural and functional aspects of genes in the cancer cell; (c) advances in genomic and proteomic technologies applicable to cancer research; (d) anticancer drug design and drug development. A main aim of CGP is to ensure the prompt and confidential review, and rapid publication of original works and reviews, generally within 1-3 months from submission.

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● Selection of Recent Articles

Translational Research for Identifying Potential Early-stage Prostate Cancer Biomarkers. N. NAKAMURA, P. ROGERS, R. EGGERTSON, S.R. POST, R. DAVIS (*Jefferson; Little Rock, AR, USA*)

Evaluating the Impacts of CYP3A4*1B and CYP3A5*3 Variations on Pharmacokinetic Behavior and Clinical Outcomes in Multiple Myeloma Patients With Autologous Stem Cell Transplant. J. LI, Y.K. CHO, D.W. SBOROV, M.A. PHELPS, C.C. HOFMEISTER, M.J. POI (*Columbus, OH; Salt Lake City, UT; Atlanta, GA, USA*)

Rab27b, a Regulator of Exosome Secretion, Is Associated With Peritoneal Metastases in Gastric Cancer. S. NAMBARA, T. MASUDA, K. HIROSE, Q. HU, T. TOBO, Y. OZATO, J. KURASHIGE, Y. HIRAKI, Y. HISAMATSU, T. IGUCHI, K. SUGIMACHI, E. OKI, T. YOSHIZUMI, K. MIMORI (*Beppu; Fukuoka; Kumamoto, Japan*)

Concurrent Reduced Expression of Contiguous PKD1, TSC2 and NTHL1 Leading to Kidney Diseases and Multiple Diverse Renal Cancers. S. MEGURO, K. TOMOYUKI, Y. HAKOZAKI, A. ONAGI, K. MATSUOKA, S. HOSHI, J. HATA, Y. SATO, H. AKAIHATA, M. KATAOKA, S. OGAWA, Y. KOJIMA (*Fukushima, Japan*)

Neoplasia-associated Chromosome Translocations Resulting in Gene Truncation. I. PANAGOPOULOS, S. HEIM (*Oslo, Norway*)

Novel TPR::ROS1 Fusion Gene Activates MAPK, PI3K and JAK/STAT Signaling in an Infant-type Pediatric Glioma. L. DELAND, S. KEANE, T.O. BONTELL, H. FAGMAN, H. SJÖGREN, A.E. LIND, H. CARÉN, M. TISELL, J.A. NILSSON, K. EJESKÄR, M. SABEL, F. ABEL (*Gothenburg; Skövde, Sweden*)

Mapping Proteome Changes in Microsatellite Stable, Recurrent Colon Cancer Reveals a Significant Immune System Signature. M. BERLE, K.E. HESTETUN, H. VETHE, S. CHERA, J.A. PAULO, O. DAHL, M.P. MYKLEBUST (*Bergen, Norway; Geneva, Switzerland; Boston, MA, USA*)

Expression of DNA Mismatch Repair Proteins, PD1 and PDL1 in Barrett's Neoplasia. J.J. SALLER, L.B. MORA, A. NASIR, Z. MAYER, M. SHAHID, D. COPPOLA (*Tampa; Bradenton; Gainesville, FL, USA*)

Biomarker Expression Profiling in Cervix Carcinoma Biopsies Unravels WT1 as a Target of Artesunate. M.E.M. SAEED, C. CIVES-LOSADA, T. EFFERTH (*Mainz, Germany; Salamanca, Spain*)

Mutational Signatures Associate With Survival in Gastrointestinal Carcinomas. P. KARIHTALA, K. PORVARI, O. KILPIVAARA (*Helsinki; Oulu, Finland*)

Long Non-coding RNAs With In Vitro and In Vivo Efficacy in Preclinical Models of Esophageal Squamous Cell Carcinoma Which Act by a Non-microRNA Sponging Mechanism. U.H. WEIDLE, F. BIRZELE (*Penzberg, Germany; Basel, Switzerland*)

Palmitoylation of the Alternative Amino Terminus of the BTK-C Isoform Controls Subcellular Distribution and Signaling. M. KOKABEE, X. WANG, E. VOORAND, E. ALIN, L. KOKABEE, F. KHAN, S. DESROSIERS, D.S. CONKLIN (*Rensselaer, NY, USA*)

Requirement of CLIC4 Expression in Human Colorectal Cancer Cells for Sensitivity to Growth Inhibition by Fucoxanthinol. R. YOKOYAMA, A. KUSHIBIKI, S. YAMADA, A. KUBOTA, H. KOJIMA, T. OHTA, J. HAMADA, H. MAEDA, M. MUTOH, M. TERASAKI (*Hokkaido; Aomori; Kyoto, Japan*)

The Contribution of PDCD6 Polymorphisms to Oral Cancer Risk. L.-C. SHIH, J.-L. HE, W.-S. CHANG, C.-L. HSU, T.-C. HSIA, Y.-C. WANG, J.-S. YANG, M.-C. MONG, C.-W. TSAI, D.-T. BAU (*Taichung, Taiwan, ROC*)

Outcomes of the Sequential Treatment of Unresectable Hepatocellular Carcinoma Using Lenvatinib. D. NAKAGAWA, S. KOMATSU, Y. YANO, M. KIDO, K. KURAMITSU, A. YAMAMOTO, S. OMIYA, Y. SHIMURA, T. GOTO, H. YANAGIMOTO, H. TOYAMA, Y. UEDA, Y. KODAMA, T. FUKUMOTO (<i>Kobe, Japan</i>)	911
Real-world Data on the Incidence of Coronavirus Disease (COVID-19) in Patients With Advanced Thoracic Cancer During the Early Phase of the Pandemic in Japan. A. FUKUDA, T. YOSHIDA, S. YAGISHITA, M. SHIOTSUKA, O. KOBAYASHI, S. IWATA, H. UMEGUCHI, M. YANAGIDA, Y. IRINO, K. MASUDA, Y. SHINNO, Y. OKUMA, Y. GOTO, H. HORINOCHI, A. HAMADA, N. YAMAMOTO, Y. OHE (<i>Tokyo; Saga; Hyogo, Japan</i>)	919
Examining the Efficacy of Nivolumab for Gastric Cancer Focusing on Using an Inflammation-based Prognostic Score: A Multicenter Retrospective Study. N. NAKAZAWA, M. SOHDA, K. TATENO, T. WATANABE, A. KIMURA, N. KOGURE, H. HOSAKA, A. NAGANUMA, M. SEKIGUCHI, K. SAITO, K. OGATA, A. SANO, M. SAKAI, H. OGAWA, K. SHIRABE, H. SAEKI (<i>Maebashi; Ohta; Takasaki; Isesaki, Japan</i>)	927
Cumulative Incidence of Thromboembolism and Prognostic Impact of Stroke in <i>BRAF</i> V600E-mutant Non-small-cell Lung Cancer. S. YAMADA, A. SEKINE, E. HAGIWARA, Y. ONODERA, E. TABATA, S. IKEDA, H. KITAMURA, T. BABA, S. KOMATSU, T. OGURA (<i>Yokohama, Japan</i>).....	935
Clear-cell Variant of Mucoepidermoid Carcinoma Presenting as a Palatal Mass in a 10-Year-old Boy. S.H. HAN, T.R. O'TOOLE, R.G. MEYER, K.B. GEIERSBACH, M.N. ISLAM, L. CHENG, J. LAI (<i>Sacramento; Roseville, CA; Rochester, MN; Gainesville, FL, USA</i>)	939
Conversion Surgery After Atezolizumab Plus Bevacizumab for Primary and Peritoneal Metastasis After Hepatocellular Carcinoma Rupture. T. MIYATA, K. SUGI, T. HORINO, A. ONO, Y. TAGAYASU, D. NOMOTO, M. INOUE, T. MIZUMOTO, T. KUBOTA, E. YANAGIDA, T. MURAYAMA, N. MIYANARI, H. BABA (<i>Kumamoto, Japan</i>)	943
Book Reviews.....	949

Comparison of Two Cisplatin Regimens for Chemoradiation in Patients With Squamous-cell Carcinoma of the Head and Neck. I. ZWAAN, T. SOROR, K.L. BRUCHHAGE, S.G. HAKIM, S.E. SCHILD, D. RADES (Lübeck; Schwerin, Germany; Phoenix, AZ, USA)	795
Comparison of Three Survival Scores in a Series of Patients ≥80 Years of Age Irradiated for Bone Metastases. D. RADES, C. DELIKANLI, S.E. SCHILD, C. KRISTIANSEN, S. TVILSTED, S. JANSSEN (Lübeck; Hannover, Germany; Scottsdale, AZ, USA; Odense; Køge, Denmark).....	801
Carbon Ion Radiotherapy Versus Perioperative Adjuvant Chemotherapy and Curative Surgery for Resectable Pancreatic Cancer. N. YAMAMOTO, T. OSHIMA, S. KAWAHARA, D. TAKAHASHI, Y. KAMIOKA, M. MURAKAWA, H. KATOH, M. UENO, S. MORINAGA (Yokohama, Japan)	809
Comparing Survival Outcomes and Impact of EPIC in Patients Undergoing CRS/HIPEC for Mucinous Appendiceal Neoplasm. M. MERCADO, R. SHAMAVONIAN, E. CHENG, N. AHMADI, D.L. MORRIS (Kogarah; Sydney, NSW, Australia)	817
Evaluation of the Impact of Smoking and Alcohol Consumption on Toxicity and Outcomes of Chemoradiation for Head and Neck Cancer. D. RADES, I. ZWAAN, S. JANSSEN, N.Y. YU, S.E. SCHILD, C. IDEL, R. PRIES, S.G. HAKIM, T. SOROR (Lübeck; Schwerin, Germany; Phoenix, AZ, USA)	823
Chemerin and Chemokine-like Receptor 1 Are Not Prognostic in Colorectal Carcinoma. F. WEBER, R. JUNG, O. TREECK, C. BUECHLER (Regensburg, Germany)	831
Prognostic Value of Serum Soluble PD-L1 in Metastatic Renal Cell Carcinoma Patients Treated With Nivolumab. N. WAKITA, N. HINATA, Y. BANDO, T. HARA, T. TERAOKAWA, J. FURUKAWA, Y. NAKANO, M. FUJISAWA (Kobe; Hiroshima, Japan)	841
Prognostic Impact of Smoking on Bevacizumab Combination Chemotherapy for Advanced Breast Cancer. K. TAKADA, S. KASHIWAGI, N. IIMORI, R. KOUHASHI, A. YABUMOTO, W. GOTO, Y. ASANO, Y. TAUCHI, K. OGISAWA, T. MORISAKI, M. SHIBUTANI, H. TANAKA, K. MAEDA (Osaka, Japan).....	849
Clinical Relevance of Proximal Gastrectomy With Double-flap Esophagogastrostomy Reconstruction With Glycemic Profile and Postgastrectomy Syndromes. J. SHIBAMOTO, T. KUBOTA, K. NISHIBEPPU, T. OHASHI, H. KONISHI, A. SHIOZAKI, H. FUJIWARA, E. OTSUJI (Kyoto, Japan).....	857
Time to Pain Relapse After Palliative Radiotherapy for Bone Metastasis: A Prospective Multi-institutional Study. A.I. SAITO, T. HIRAI, T. INOUE, N. HOJO, S. KAWAI, Y. KATO, K. ITO, M. KATO, Y. OZAWA, H. SHINJO, K. TODA, R.-I. YOSHIMURA (Tokyo, Japan)	865
Glasgow Prognostic Score Predicts Survival and Recurrence Pattern in Patients With Hepatocellular Carcinoma After Hepatectomy. T. KUMAMOTO, K. TAKEDA, R. MATSUYAMA, Y. SAWADA, K. SAHARA, Y. YABUSHITA, Y. HOMMA, J. WATANABE, M. NUMATA, T. SATO, D. MORIOKA, C. KUNISAKI, I. ENDO (Yokohama, Japan)	875
Analysis of Clinical Factors in Olaparib-related Anemia Using Adverse Drug Event Reporting Databases. C. SHIRAISHI, T. HIRAI, T. OGURA, T. IWAMOTO (Mie, Japan)	883
Prognostic Significance of Preoperative Nutritional Assessment in Elderly Patients who Underwent Laparoscopic Gastrectomy for Stage I-III Gastric Cancer. H. UEHARA, M. OTA, M. YAMAMOTO, T. NAKANOKO, Y. SHIN, K. SHIOKAWA, Y. FUJIMOTO, Y. NAKASHIMA, M. SUGIYAMA, E. ONISHI, T. SHIMAGAKI, Y. MANO, K. SUGIMACHI, M. MORITA, Y. TOH (Fukuoka, Japan)	893
The Prognostic Implications of Perioperative Serum Cholesterol Levels in Patients With Gastric Cancer. A. YAMAMOTO, K. SHODA, Y. KAWAGUCHI, H. AKAIKE, S. FURUYA, K. SHIRAISHI, K. HIRAYAMA, R. SAITO, N. ASHIZAWA, K. TAKIGUCHI, N. HOSOMURA, H. AMEMIYA, H. KAWAIDA, H. KONO, D. ICHIKAWA (Chuo, Japan)	903

Clinical Course of Vitamin B12 Deficiency and Associated Risk Factors in Patients After Total Gastrectomy for Gastric Cancer. T. AOYAMA, K. HARA, Y. MAEZAWA, K. KAZAMA, I. HASHIMOTO, S. SAWAZAKI, K. KOMORI, H. TAMAGAWA, A. TAMAGAWA, K. KANO, H. CHO, J. MORITA, K. SEGAMI, M. ISHIMOTO, T. OSHIMA, N. YUKAWA, Y. RINO (<i>Yokohama; Tokyo, Japan</i>).....	689
Preoperative Plasma miRNA Levels Predict Prognosis in Early-stage Malignant Melanoma. M.S. BAGHERI, J. POLIVKA, I. TRESKOVA, K. HOUFKOVA, T. KNIZKOVA, V. WOZNICA, T. FIKRLE, K. PIVOVARCIKOVA, M. SVATON, D. SHETTI, R. NEGI, M. PESTA (<i>Pilsen, Czech Republic</i>).....	695
Evaluation of 95-Gene Classifier of Formalin-fixed Paraffin-embedded Tissues in ER-positive, HER2-negative, and Node-negative Breast Cancer. H. YAMASHITA, K.C. HATANAKA, K. YAMAGISHI, Y. SAITO, K. HAMASAKI, M. TANIGUCHI, A. OKUMURA, A. NANGE, Y. MATSUNO, Y. HATANAKA (<i>Sapporo; Kobe, Japan</i>)	707
Real-world Efficacy and Safety of Atezolizumab Plus Bevacizumab, Paclitaxel and Carboplatin for First-line Treatment of Japanese Patients With Metastatic Non-squamous Non-small Cell Lung Cancer. N. IKEUCHI, F. IGATA, E. KINOSHITA, T. KAWABATA, I. TAN, Y. OSAKI, R. OTSUKA, R. ON, T. IKEDA, A. NAKAO, T. SASAKI, T. AOYAMA, R. HIRANO, T. HARADA, N. EBI, M. FUJITA, H. INOUE (<i>Fukuoka, Japan</i>)	713
Relationship Between Osimertinib Concentration and Clinical Response in Japanese Patients With Non-small Cell Lung Cancer. M. YAMAZAKI, N. KOMIZO, H. IIHARA, C. HIROSE, K. YANASE, Y. YAMADA, J. ENDO, S. YAMASHITA, Y. OHNO, K. TODOROKI, A. SUZUKI, H. HAYASHI (<i>Gifu; Shizuoka, Japan</i>)	725
Breast Conserving Surgery in Combination With Targeted Intraoperative Radiotherapy Compared to Mastectomy for In-breast-tumor-recurrence. H.-C. KOLBERG, H. NIESING, J.S. VAIDYA, L. AKPOLAT-BASCI, A. MAGUZ, O. HOFFMANN, G. LOEVEY, M. STEPHANOU, C. KOLBERG-LIEDTKE (<i>Bottrop; Wiesbaden; Essen, Germany; London, UK</i>)	733
Independent Validation of a Risk Stratification Model Predicting Survival in Elderly Patients Irradiated for Bone Metastases. C. NIEDER, L. STANISAVLJEVIC, B. MANNSÅKER, E.C. HAUKLAND (<i>Bodo; Tromso; Stavanger, Norway</i>)	741
Prognostic Factors and Independent Validation of a Risk Stratification Model in Octogenarian Patients Irradiated for Brain Metastases. C. NIEDER, A. DALHAUG (<i>Bodø; Tromsø, Norway</i>).....	749
Lenvatinib Versus Sorafenib in Advanced Hepatic Cell Carcinoma: A Double Center Retrospective Analysis. G.A. MARROCCO, M. SILLETTA, V. BIANCO, F. MONDERA, C. SCIORTINO, L. PAPPALARDO, V. VIGLIALORO, E. CORTESI, G. TONINI, S. CAPONNETTO (<i>Rome, Italy</i>)	755
Pelvic Recurrence After Curative Resection for Rectal Adenocarcinoma: Impact of Surgery on Survival. C. FERRARI, L. CUNIOLO, M. MASCHERINI, M. SANTOLIVUDO, S. DI DOMENICO, F. DE CIAN (<i>Genoa, Italy</i>)	765
Breaking Bad News During the COVID-19 Pandemic: A Systematic Review of the Literature. G. GOUMAS, N. SYRIGOS, E. FYTA, T.I. DARDAVESIS, E. SIMOU (<i>Athens; Kifissia; Thessaloniki, Greece; Boston, MA, USA</i>).....	773
Correlation of Pre- and Post-radio-chemotherapy MRI Texture Features With Tumor Response in Rectal Cancer. F. PAIAR, M. GABELLONI, F. PASQUALETTI, P. COCUZZA, S. MONTRONE, C. ARENA, L. FAGGIONI, Z. FALASCHI, L. DEL SECCO, A. ALBERICH-BAYARRI, L.M. BONMATI, E. NERI (<i>Pisa; Lucca, Italy; Valencia, Spain</i>)	781
Small Bowel Lipomatosis: An Unusual Radiological Finding in Patients With Renal Cell Cancer on Pazopanib. A. SHARMA, A. LAKHANI, S. GHOSH-RAY, S. ALAM, A. PADHANI, A. GOGBASHIAN, P. NATHAN (<i>Northwood, UK</i>).....	789

Ultra-high Dose-rate Carbon-ion Scanning Beam With a Compact Medical Synchrotron Contributing to Further Development of FLASH Irradiation. M. YAGI, S. SHIMIZU, K. MINAMI, N. HAMATANI, T. TSUBOUCHI, M. TAKASHINA, M. UMEZAWA, T. NOMURA, W. MUKOYOSHI, T. NISHIO, M. KOIZUMI, K. OGAWA, T. KANAI (<i>Osaka; Chiba, Japan</i>)	581
Prognostic Value of WNT1, NOTCH1, PDGFR β , and CXCR4 in Oral Squamous Cell Carcinoma. P. CIERPIKOWSKI, A. LIS-NAWARA, J. BAR (<i>Wroclaw, Poland</i>)	591
Eribulin Treatment Promotes Re-expression of Estrogen Receptor in Endocrine Therapy-resistant Hormone Receptor-positive Breast Cancer Cells. W. GOTO, S. KASHIWAGI, N. IIMORI, R. KOUHASHI, A. YABUMOTO, K. TAKADA, Y. ASANO, Y. TAUCHI, K. OGISAWA, T. MORISAKI, M. SHIBUTANI, H. TANAKA, K. MAEDA (<i>Osaka, Japan</i>)	603
Anti-VEGF and Anti-EGFR Antibody Therapy on T-Cell Infiltration and TCR Variation in Metastatic Colorectal Cancer. M. XU, R. TSUNEDOMI, K. KIYOTANI, S. TOMOCHIKA, K. FURUYA, M. NAKAJIMA, H. MATSUI, Y. TOKUMITSU, Y. SHINDO, S. YOSHIDA, M. IIDA, N. SUZUKI, S. TAKEDA, T. IOKA, S. HAZAMA, H. NAGANO (<i>Yamaguchi; Tokyo, Japan</i>)	613
Antitumor Effects of Deep Ultraviolet Irradiation for Pancreatic Cancer. K. YAMAZAKI, T. KOKURYO, J. YAMAGUCHI, M. SUNAGAWA, A. OGURA, N. WATANABE, S. ONOE, K. MIYATA, T. MIZUNO, K. UEHARA, T. IGAMI, Y. YOKOYAMA, T. EBATA, M. NAGINO (<i>Nagoya, Japan</i>)	621
Spontaneous Regression of Swine Melanoma: The Role of Tumour-infiltrating T and NK Cells. D. PLANSKA, V. HORAK (<i>Prague; Libechov, Czech Republic</i>)	631
5-Azacytidine (5-aza) Induces p53-associated Cell Death Through Inhibition of DNA Methyltransferase Activity in Hep3B and HT-29 Cells. D.-Y. KIM, R. LEE, H.-T. CHEONG, C.-S. RA, K.-J. RHEE, J. PARK, B.D. JUNG (<i>Chuncheon; Wonju, Republic of Korea</i>).....	639
Epithelial–Mesenchymal Transition Phenotype and Peritumoral Immune Cell Infiltration in Advanced Biliary Tract Cancer. C.R. OH, H.-D. KIM, Y.-M. RYU, S. LEE, D. KIM, D.S. LEE, J.H. JEONG, H.-M. CHANG, B.-Y. RYOO, K.-P. KIM, M. KIM, S.-Y. KIM, C. YOO (<i>Seoul, Republic of Korea</i>)	645
<i>Clinical Studies</i>	
Real-world Data on Olaparib in Relapsed BRCA-mutated Ovarian Cancer: A Multicenter GINECO RETROLA Cohort Study. H. BOURIEN, L.B. LEFEVRE, M.-A. MOURET-REYNIER, B. ASSELAIN, B. LUCAS, C. GAVOILLE, C. CORNILA, L. GAVOILLE, E. COLOMBA, A. PATSOURIS, M. FABBRO, C. CHAKIBA, P. TOUSSAINT, H. SIMON, D. BERTON, D. GARBAY, C.G. TIXIDRE, D. COEFFIC, A. MORVAN, O. COLLARD, T. DE LA MOTTE ROUGE (<i>Rennes; Dijon; Clermont Ferrand; Paris; Brest; Vandoeuvre Les Nancy; Orléans; Nancy; Villejuif; Angers; Montpellier; Bordeaux; Lyon; Saint-Herblain; Aix en Provence; Saint-Etienne, France</i>) ..	653
Risk of Neurological Decline in Patients With Temporal Lobe Brain Masses. J. SWEENEY, M. BONDOC, S. BANDLAMURI, M. HOLDAWAY, P. ENTEZAMI, M.W. O'BRIEN, M.A. ADAMO (<i>Albany, NY, USA</i>)	663
Refined Diagnosis of Pleural Effusions by Immunocytochemistry of Cell Blocks. H. KOYI, E. WILANDER (<i>Gävle; Stockholm, Sweden</i>)	669
Comparison of the Efficacy and Toxicity of Concurrent Chemoradiotherapy and Durvalumab and Concurrent Chemoradiotherapy Alone for Locally Advanced Non-small Cell Lung Cancer With N3 Lymph Node Metastasis. T. ABE, M. IINO, S. SAITO, T. AOSHIKA, Y. RYUNO, T. OHTA, M. IGARI, R. HIRAI, Y. KUMAZAKI, Y. MIURA, K. KAIRA, H. KAGAMU, S.-E. NODA, S. KATO (<i>Hidaka, Japan</i>)	675
Ki67 and E-cadherin Are Independent Predictors of Long-term Survival in Endometrial Carcinoma. B. MARTIN-SALAMANCA, D. ERASUN, J. LLORCA, J. SCHNEIDER (<i>Madrid; Santander; Valladolid, Spain</i>)	683