DESCRIPTION

Current Problems in Cancer seeks to promote and disseminate innovative, transformative, and impactful data on patient-oriented cancer research and clinical care. Specifically, the journal's scope is focused on reporting the results of well-designed cancer studies that influence/alter practice or identify new directions in clinical cancer research. These studies can include novel therapeutic approaches, new strategies for early diagnosis, cancer clinical trials, and supportive care, among others. Papers that focus solely on laboratory-based or basic science research are discouraged. The journal's format also allows, on occasion, for a multi-faceted overview of a single topic via a curated selection of review articles, while also offering articles that present dynamic material that influences the oncology field. Original case reports featuring prevention, diagnosis and treatment of cancer, supportive care, quality of life and rehabilitation can be submitted to the journal's open access companion title, Current Problems in Cancer: Case Reports (CPCCR). Any case reports submitted to Current Problems in Cancer (CPC) will be considered for publication in either CPC or CPCCR.

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*Current Problems in Cancer* aims to fortify the field of oncology by publishing strong articles focused upon disease management, prevention, strategies for early diagnosis, specific classes of therapeutic agents, results of a clinical trial, an emerging interventional technique, supportive care, and rehabilitation/reconstruction. The journal's unique issue structure allows for a multi-faceted overview of a single topic via a curated selection of review articles, while also offering articles that present dynamic and front-line material immediately influencing the field.

*Current Problems in Cancer* publishes original research, reviews, mini reviews, and case reports accompanied by mini reviews.

**Article Types**

**Research Paper** should not exceed 3000 words excluding references (usually less than 50). Typically we allow up to 6 tables/figures. Consider including more data as supplementary figures.

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**Tumor Board Report:** Tumor board reports are not case reports, but rather in-depth discussions of rare, difficult, or illuminating oncology conditions which should mirror the style of a clinical tumor board discussion. Manuscripts should be arranged according to the following sections: Clinical Presentation, Differential Diagnosis, Pathology, Options for Management (including possible roles for chemotherapy, radiation therapy, and surgery), Role of Targeted Therapy or Molecular Diagnostics, and Areas of Uncertainty. While Tumor Board Reports should incorporate exemplar cases, the emphasis should be on the authors' decision-making process regarding treatments and outcomes. Tumor board cases will have a maximum length of 2000 words, and are limited to 6 tables and/or figures and 10 references. A brief description of the case (limited to 150 words) is required.

Authors who wish to prepare a Tumor Board Report must outline the below in their cover letter:

- **Presentation:** Brief 1-2 sentence summary of the case
- **Key questions before the tumor board:** treatment selection, differential diagnosis, molecular pathology
- **Discussion:** particularly instructive, illuminating, or difficult aspects of the case

Tumor Board Reports submitted to CPC will now be considered for publication in either CPC or Current Problems in Cancer: Case Reports. For more information on this new Open Access journal, please visit the homepage, [https://www.journals.elsevier.com/current-problems-in-cancer-case-reports/](https://www.journals.elsevier.com/current-problems-in-cancer-case-reports/)
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