

Comment

One of the most important problems in contemporary oncology is a low progress in reduction of mortality because of cancer. It has been recognized that there is a huge potential for improvements provided personalized – based on individual genotypes, medical management is applied. Studies of genotype-clinical correlations are the main goal of clinical genetics of cancer.

Enclosed please find a series of articles describing the latest progress in clinical genetics of cancers especially of the breast, colon, prostate, lung and thyroid gland. According to my opinion the most important of the latest advances are findings showing:

- a) huge influence of adnexectomy on survival of breast cancer patients with *BRCA1* mutations,
- b) complete pathologic remissions of majority of breast cancers in *BRCA1* mutations carriers due to neoadjuvant treatment with cis-platinum,
- c) indication for preventive adnexectomy at age 35 in carriers of *MSH2/MLH1* mutations,
- d) elaboration of diagnostic panel detecting high risk of prostate cancer in Poland based on analysis of 7 SNPs in 4 genes: *NBS1*, *CHEK2*, *HOXB13* and the rs188140481 variant in the 8q24 region,
- e) the use of serum selenium levels for selection of smokers for CT screening aimed to detect the earliest lung cancers.

The last years confirm that expected contribution of genome analyses into oncology has become real current practice, but it is almost sure that this is just beginning of the future, which is going to be more and more dependant on information from DNA.

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