



Gastroenterology Research and Practice

Special Issue on
Tailored Treatment in Rectal Cancer: Advances in Staging and Therapy

CALL FOR PAPERS

In rectal cancer many new strategies have been introduced over the past years regarding staging as well as treatment. New risk factors for local recurrence have been identified (e.g., EMVI) and new techniques to assess risk factors have been introduced. Additionally, several new techniques have been introduced (diffusion-weighted imaging, dynamic contrast enhanced imaging, etc.) that have been primarily evaluated for prediction and evaluation of response after neoadjuvant treatment. This increasing interest for new imaging techniques and risk profile assessment is a result of the emerging paradigm shift from major surgery to organ preserving treatment in good and complete responders after neoadjuvant chemoradiation. This paradigm shift towards organ preserving strategies has also stimulated research on new neoadjuvant strategies in order to increase response rates. So far, many pilot studies have been performed with regard to new staging techniques, neoadjuvant therapy, and organ preserving treatment, but more conclusive evidence needs to be provided. Therefore, this special issue aims at publishing papers on new imaging and treatment strategies in rectal cancer, in order to provide a comprehensive overview of the advances that will change rectal cancer diagnosis and management in the near future.

We invite researchers to submit papers regarding (1) new imaging techniques for risk assessment at primary staging and for the prediction and evaluation of response to neoadjuvant treatment and (2) papers evaluating new treatment strategies (including new endoscopic treatment, imaging guided treatments, neoadjuvant treatment, and organ preserving strategies).

Potential topics include, but are not limited to:

- ▶ Systematic reviews and meta-analyses addressing recent advances in staging and restaging after neoadjuvant treatment
- ▶ Pilot studies assessing new functional imaging techniques (e.g., DWI, DCE-MRI, ultrasound, and endoscopic techniques) to predict and evaluate response before and after neoadjuvant treatment
- ▶ New strategies to assess the individual risk profile of tumours in order to individualize treatment
- ▶ Efficacy of new neoadjuvant treatment regimens in rectal cancer
- ▶ Intensity modulated radiotherapy
- ▶ Neoadjuvant chemotherapy without radiotherapy for rectal cancer
- ▶ Organ preserving treatment, e.g., wait-and-see policy or local excision

Authors can submit their manuscripts via the Manuscript Tracking System at <http://mts.hindawi.com/submit/journals/grp/ttrc/>.

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