

Foreword



Nicholas J. Petrelli, MD
Consulting Editor

This issue of the *Surgical Oncology Clinics of North America* is dedicated to hereditary colorectal cancer. The guest editor is Steven Gallinger, MD, who is professor of surgery at the University of Toronto.

In 2009, an estimated 106,100 new cases of colon cancer and approximately 40,870 cases of rectal cancer will occur, and 49,920 people will die from colon and rectal cancer. Despite these statistics, mortality from colon cancer has decreased slightly over the past 30 years, possibly because of earlier diagnosis through screening and better treatment modalities. In the general population, the lifetime risk of colorectal cancer is approximately 5% to 6%. Patients who have two or more first- or second-degree relatives with colorectal cancer make up approximately 20% of all patients with this disease. Approximately 5% to 10% of the total annual colorectal cancer cases are inherited in an autosomal dominant manner, however. There is no question that the most important issue leading to the diagnosis of hereditary colorectal cancer is a thorough family history. Individual knowledge of family history is probably the most important factor for health today. Hereditary colorectal cancer can be separated into two global categories based on the location of the cancer. Colorectal cancers involving the distal large intestine are more likely to harbor mutations in the adenomatous polyposis coli, p53, and K-ras genes and in general behave more aggressively. Alternatively, proximal colorectal cancers are more likely to possess microsatellite instability, have mutations in the mismatched repair genes, and behave in a less aggressive manner, as in hereditary nonpolyposis colorectal cancer. Familial adenomatous polyposis and the majority of sporadic cases can be considered a paradigm for the distal class of colorectal cancers whereas hereditary nonpolyposis colorectal cancer can represent the proximal class or category of cancers.

Dr. Gallinger has put together an outstanding group of authors in this issue of the *Surgical Oncology Clinics of North America*. The article by Smith and Rodriguez-Bigas, entitled, "The Role of Surgery in Familial Adenomatous Polyposis and Hereditary Nonpolyposis Colorectal Cancer," is an excellent discussion of these two entities. Drs. Smith and Rodriguez-Bigas are from the Department of Surgical Oncology at

the MD Anderson Cancer Center. An article by Noralane Lindor, MD, from the Department of Medical Genetics at the Mayo Clinic, entitled, "Familial Colorectal Cancer Type X," also presents an outstanding discussion.

I am sure readers will also enjoy the other articles in this edition of *Surgical Oncology Clinics of North America*. As I have stated in my previous forewords, this edition is an outstanding one for individuals in training in all fields of medicine.

Nicholas J. Petrelli, MD
Helen F. Graham Cancer Center
4701 Ogletown-Stanton Road
Suite 1213
Newark, DE 19713, USA

Department of Surgery
Jefferson Medical College
1021 Walnut Street
Philadelphia, PA 19107, USA

E-mail address:
npetrelli@christianacare.org (N.J. Petrelli)