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Editor-in-Chief

**A New Era for Clinical Ovarian and Other Gynecologic Cancer**

Welcome to our newly renamed journal Clinical Ovarian and Other Gynecologic Cancer. This semiannual international journal is dedicated to providing practicing physicians and health care professionals with the most up-to-date, clinically relevant information available to help them provide only the highest quality care for their patients with gynecologic cancer. It is my privilege to serve as the newly appointed Editor of this journal.

The care of women with ovarian or other gynecologic cancers has evolved significantly over the past couple of decades. Diagnostic tests are now available to help identify women who have a genetic predisposition for ovarian or endometrial cancer or who may harbor cervical dysplasia. Advancements in surgical techniques now allow for more radical debulking of both upper abdominal and pelvic disease in women with advanced ovarian cancer. Laparoscopic and robotic surgical techniques have revolutionized the surgical approaches to patients with endometrial and cervical cancer.

Advances in conformal and intensity-modulated radiation therapy now allow radiation oncologists to target pelvic tumor tissues more specifically and spare normal tissues. The development of new chemotherapy agents and new delivery approaches has improved progression-free survival in patients with ovarian and other gynecologic cancers. New biological agents such as antiangiogenesis agents and PARP inhibitors, as well as others, have demonstrated promising antitumor effects.

Yet despite these advances, there is still much work to do before we can realize real and significant improvement in the survival of so many women whose lives are cut short by ovarian or other gynecologic cancers. What are the key steps that will help achieve this worthwhile goal?

First, there is a need to ensure that all patients with ovarian and gynecologic cancers get the highest quality care currently available. Recent data would suggest that a substantial number of newly diagnosed patients with ovarian cancer are not receiving what would be considered standard therapy. Addressing these and other disparities is complicated but must be addressed if we are to see patients with gynecologic cancer achieve the best possible outcome.

Second, there is a need to increase our understanding of the biological characteristics of ovarian and other gynecologic cancers. Recent breakthroughs in high-throughput technology are being used to further elucidate the biological features of ovarian and other gynecologic cancers. The Cancer Genome Atlas project in the past year published the results of their analysis of a cohort of patients with high-grade serous epithelial ovarian cancer. This study provided new insights into the number of molecular pathways involved in high-grade serous tumors, the leading cause of mortality in ovarian cancer. Other studies are elucidating the molecular pathways and alterations in the tumor microenvironment involved in other epithelial ovarian cell types and in other gynecologic cancers.

As the biological characteristics of gynecologic cancers are further elucidated, there will be a need to develop strategies to target the involved molecular processes. Innovative clinical trials will be needed to test the efficacy of these targeted agents in smaller subsets of patients so that more personalized approaches to treat an individual patient, based on that individual's unique tumor profile, can be identified.

Finally, advances in genetics and in the molecular consequences of lifestyle choices will allow for opportunities to identify additional women at risk for gynecologic cancer and for novel strategies to either prevent or improve outcomes in women at risk for, or diagnosed with, gynecologic cancers. Indeed, many countries are dealing with an obesity epidemic that puts many women at risk for various gynecologic cancers or negatively affects outcome in women diagnosed with gynecologic cancer.

Thus, how can this journal best help our readership at present to enhance the quality of care for their patients at risk or for those diagnosed with gynecologic cancer and to keep up with the aforementioned steps that will lead to important breakthroughs in the prevention and treatment of gynecologic cancer? We will accomplish this goal by using 3 primary measures. We will first provide review articles on the detection, diagnosis, prevention, and treatment of gynecologic cancers. Such reviews should reach out to more practitioners and provide them with the most current guidelines regarding the management of patients at risk for, or diagnosed with, gynecologic cancer. Reviews on new cutting-edge scientific discoveries will also be published frequently. Our journal will also publish debates on controversial topics in gynecologic oncology, particularly when there are major disagreements regarding the various options available to manage patients with gynecologic cancer. Finally, Clinical Ovarian and Other Gynecologic Cancer will continue to publish original research articles focusing primarily on clinical and translational research in gynecologic cancer and unique gynecologic cancer case reports.

The journal is indebted to Dr. Tate Thigpen who has served as its Editor since its inception in 2008 under the title of Clinical Ovarian Cancer and other Gynecologic Malignancies. Dr. Thigpen worked diligently to get this journal off the ground. The early issues were dominated by content that he personally solicited. We could not have reached this point without his strong vision for and dedication to this journal. It was my privilege to serve with Dr. Thigpen over the past year as co-Editor and before that as an Associate Editor. I will do my best as the new Editor along with my new Deputy Editor, Dr. Paul Sabbatini, to help our journal deliver practical information that practitioners will find useful in determining how best to manage patients risk for, or diagnosed with, ovarian or other gynecologic cancers.

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