EDITORIAL

Colorectal cancer: Pathways to optimized care

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Welcome to the September issue of *ARO!* This month's focus centers on colorectal cancer, the third leading cause of cancer-related deaths in the US for men and women and the second most common cause when genders are combined. Fortunately, the death rate overall has been receding for decades thanks to screening efforts and improved treatments. But among those younger than 55, deaths from colorectal cancer have steadily increased 1% per year from 2007-2016.[1]

In the SA-CME review article, *Proton therapy for colorectal cancer,* authors examine clinical and dosimetric data and describe how this radiation therapy technique has the potential to improve treatment by lowering toxicity in locally advanced rectal cancer. This well-written and comprehensive update further explores the rationale for protons, as well as outcomes, limitations, and exciting future directions.

Since 25% of patients with colorectal cancer are metastatic at diagnosis, with liver the most common site, we are pleased to also feature another SA-CME article, *Multimodality management of colorectal liver oligometastases*. This detailed review describes modern treatment approaches for low-volume liver metastases that may complement multi-agent systemic therapy, as well as indications for focal therapies. At the end of the article, a compelling case of a patient with stage IVA rectal cancer who demonstrated a complete response following stereotactic body radiation therapy (SBRT) is discussed.

An additional case report, *Substituting SBRT boost for brachytherapy using Mayo protocol for peri-hilar cholangiocarcinoma,* offers an interesting and important example for patients who cannot undergo brachytherapy for this bile duct cancer due to anatomical constraints or for centers lacking access or expertise to brachytherapy.

Rounding out the theme is the Technology Trends article, *IMRT, VMAT and image guidance: Changing the landscape of colorectal cancer treatment*. Experts discuss the shift from 3-dimensional conformal RT (3DCRT) to intensity-modulated radiation therapy (IMRT) in colorectal cancer, along with personalized care, reimbursement and recent trials.

We are also pleased to provide an SA-CME review on chemoradiation treatment for glioblastoma multiforme, a research paper exploring radiation dose and overall survival in ependymoma, a case report that helps expand the literature on the abscopal effect with malignant melanoma, and the Resident Voice editorial that shares intriguing journeys to and wise advice for a career in radiation oncology.

We hope you enjoy this issue and look forward to seeing you at the ASTRO 2019 conference in Chicago this month to further your education, network, and growth in radiation oncology. Safe travels to the Windy City, and best wishes for a terrific meeting!

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Reference

1. American Cancer Society. Key Statistics for Colorectal Cancer. https://www.cancer.org/cancer/colon-rectal-cancer/about/key-statistics.html. Accessed August 20, 2019.