
Adrenal cancer

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Foreword

This book on “**Adrenal Cancer**” actually deals with adrenal cortical cancer (it does not address malignant pheochromocytomas).

This is a rare disease, which is often diagnosed at a late stage, and for which there is no totally efficacious medical treatment. Hence, its dismal prognosis.

There are three important messages that the reader should keep in mind after careful reading of all nine chapters:

- **The single best likelihood of “cure”** is when a localized tumor can be subjected to “complete” surgical removal. An early diagnosis is crucial. When faced with an adrenal tumor, an endocrinologist must always ask two questions: could it be a pheochromocytoma? Could it be an adrenal cortical carcinoma? In both cases, it can be a vital question which can make the difference between a fatal issue or cure!
- **Research**, both basic and clinical, is key to further progress: a better understanding of the biology of these tumors has already shed some light on the role of signalling pathways, on some familial syndromes, on new prognostic markers. There is some hope that these approaches will provide us with targeted therapies. Alternatively, progress in our understanding on the general mechanisms of tumor growth might help us design new therapeutic tools using antiangiogenic agents and/or immunotherapy.
- **Reference Centers and National (and European) Networks** are essential to optimize individual patient management, as well as to organize basic research and multicenter clinical trials on this rare disease. For an individual patient, difficult therapeutical options are best offered by a multidisciplinary team (endocrinologist, oncologist, surgeon, radiologist, pathologist, radio-therapist...). In order to boost scientific exchange, to facilitate and harmonize analyses of biological samples, to allow the design of epidemiologic studies or prospective therapeutic trials, several European countries have developed National Networks dedicated to the study of adrenal tumors: COMETE in France, NISGAT in Italy, GANIMED in Germany. In a recent initiative, supported by the Appel d’Offres GIS-Maladies Rares, these national networks have merged into the European network **ENS@T** (European Network for the Study of @drenal Tumors): its goal is to create a Network wide enough to allow the recruitment of a greater number of patients with rare diseases, and to harmonize diagnostic and therapeutic procedures at the European level. There is strong hope that ENS@T, particularly through its Working Group on Adrenal Cortical Cancer, will successfully contribute to the fight against this killer disease.

