# PubMed Central (PMC) Metadata for Query: cancer

## Abscopal response in a patient with fibrolamellar hepatocellular carcinoma following radiotherapy.

Authors: Schoenfeld JD, Haas-Kogan DA, O'Neill AF

Journal: No journal

Abstract: No abstract

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## Concerns about the role of physician associates in UK clinical practice.

Authors: Kunkler I

Journal: No journal

Abstract: No abstract

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## Australia's National Lung Cancer Screening Program-It's Time to Address the Stigma in the Room.

Authors: Rose S, McFadden K, Harrison NJ, Dodd RH, Onwuka S, Paul C, Carter-Bawa L, Brooke M, Weber M

Journal: No journal

Abstract: The National Lung Cancer Screening Program is commencing in Australia in July 2025. This significant public health initiative will maximise earlier detection of lung cancer and improve outcomes for many Australians. However, the adoption of a screening program for a disease that is stigmatised, given the known links between tobacco smoking and lung cancer, creates barriers for participation. In this perspective, we argue the need to challenge public rhetoric around smoking being a 'choice' and the importance of dialogue that is free of judgement and blame towards individuals. We briefly examine initiatives that have been implemented to reduce public stigma and highlight the multi-level considerations to ensure that everyone, regardless of having smoked or not, receives the quality care and support that they deserve.

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## Multicenter Retrospective Registry Study on BCG Use in Non-Muscle Invasive Bladder Cancer in Latin America: BLATAM (Bladder Cancer in Latin America) Group.

Authors: Villoldo GM, Gonzalez MI, Faune AV, Molina RC, Montoya FM, Salcedo JGC, Vitagliano G, Zampolli H, Lima AR, Bengio R, Camean JJ, Alfieri GÁ, Escalante GJP, Castro IEB, Pita HR, Escuder J, Covarrubias FR, Oliveira MF, Sanchez-Salas R, Favre GA, Guevara E, Videla EA, Delgado GM, Videla EA, Tobia I, Bachur RFV, Autran AM

Journal: No journal

Abstract: <h4>Objectives</h4>This study, conducted by the Bladder Cancer in Latin America (BLATAM) group, aims to analyze epidemiological and therapeutic data on non-muscle invasive bladder cancer (NMIBC) in Latin American patients. It seeks to identify factors contributing to suboptimal responses to Bacillus Calmette-Guérin (BCG) therapy and assess areas for improvement in regional treatment practices.<h4>Materials and methods</h4>A multicenter retrospective study was carried out in collaboration with reference Urology Departments across Latin America. Data were collected using an electronic Case Report Form (CRF) from 2011 to 2021, capturing demographics, clinical presentation, treatment details, and follow-up of NMIBC patients treated with BCG. Statistical analyses included Kaplan-Meier survival analysis for relapse-free survival (RFS).<h4>Results</h4>Data from 292 patients across five countries were analyzed, with a mean age of 70.3 years and a male prevalence of 74%. Smoking history was reported in 70.6% of patients. The mean time to the first BCG dose was 2.4 months post-TURBT, with 26.7% of patients exceeding the recommended 60-day window for induction initiation. While 84% of patients completed BCG induction, only 45.9% followed the recommended Lamm maintenance schedule. Delays in starting maintenance cycles were observed, with a median delay of over 36 days for the first cycle and 65 days for the second cycle. RFS at 1 year and 5 years for high-risk patients was 87.3% and 53.3%, respectively.<h4>Conclusions</h4>This study highlights critical deviations from recommended NMIBC management protocols in Latin America, including delayed BCG initiation and inconsistencies in maintenance therapy. These findings emphasize the need for standardized treatment protocols and improved adherence to international guidelines, which could enhance NMIBC patient outcomes in the region. Collaborative efforts are essential to develop region-specific strategies, improve data collection, and ultimately provide better care for bladder cancer patients in Latin America.

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## Effects of light-intensity physical activity on health-related outcomes in cancer survivors: A systematic review.

Authors: Tanaka R, Matsunaga-Myoji Y, Kubo S, Nagao N, Fujita K

Journal: No journal

Abstract: <h4>Aim</h4>Nurse-led lifestyle education may be particularly effective for promoting light-intensity physical activity (LPA), which is often included as part of patients' daily activity. We aimed to conduct a comprehensive review of associations between LPA and health-related outcomes among cancer survivors and clarify the effects of LPA.<h4>Methods</h4>We searched four databases to identify relevant studies that involved participants aged ≥18 years, classified physical activity based on intensity, and measured LPA during the whole day by accelerometers or questionnaires. The quality of the included studies was assessed using quality assessment tools specific to LPA studies. The results were synthesized narratively.<h4>Results</h4>We extracted 34 relevant studies. Eleven studies focused on multiple cancers, eleven on breast cancer, five on colorectal cancer, three on lung cancer, and one each on head and neck cancer, non-Hodgkin's lymphoma, prostate cancer, gynecological cancer, and colorectal and gastric cancer. Six studies reported that LPA was effective for improving fatigue. Although LPA also showed favorable associations with physical function and mortality, the number of studies was insufficient (four studies each). No association was found between LPA and adiposity (n = 5). Results for the associations between LPA and quality of life (QOL) (n = 12), depression (n = 4), and cognitive function (n = 3) were conflicting.<h4>Conclusion</h4>This review confirmed that LPA is effective in improving several health-related outcomes. However, the results are integrated across cancer types, and further studies should investigate each outcome for each cancer type to clarify the effect of LPA.

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