

Topography in Cancer Science

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Abstract

Topography of cancer disease tell to the researcher a great source of information useful to better understand the pathogenetic process and risk factors.

Keywords: cancer; oncology; topography; statistics; epidemiology pathology; stokastic events; Phenotypic expression; undifferentiated process

Introduction

Topography of cancer disease tell to the researcher a great source of information useful to better understand the pathogenetic process and risk factors.

What it mean when in a single apparatus related the topography there are different kind of cancer?

The probability not is the same? What local factors can act in this situations?

Why brain cancer in example start in an emisphere preferentially? And the same lung cancer?

Topography in the example of left or right side of colon cancer tell that different pathologic movens

Acts in different part of an apparatus or organ.

The same observing the gradient of some pathologic – toxic condition is possible to correlate to a specific Condition.

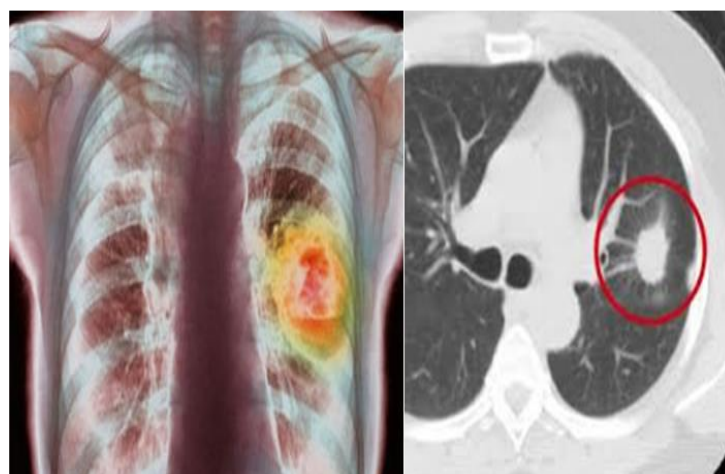


Figure: 2 lung cancer

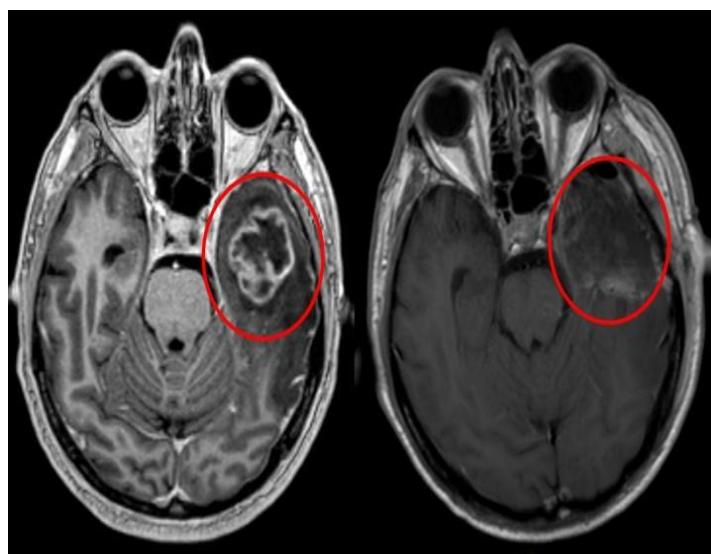


Figure: 1 brain cancer

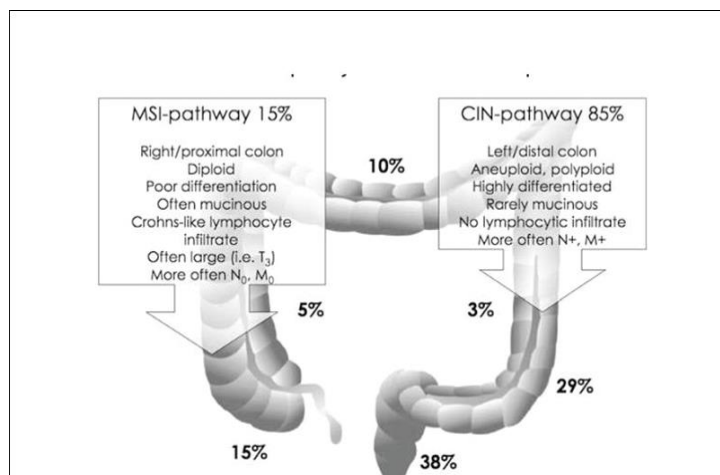


Figure: 3 colon cancer



Material and Methods

With an observational approach some relevant literature for the scope of this work are analyzed in order to produce a global conclusion.

Results Discussion Conclusion

Related the reference reported in this work is possible to verify that: Epidemiology of cancer is clear and the same some geographic distribution of cases and relationship

With some local exogenous factors that change in example in different part of the world.

The same distribution of some cancer in the same apparatus that present the same phenotypic. Genotypic field is a real fact even if exposed to the same toxic factor. (why lung cancer start in a lobe and not in the same time in the other if caused by cancerogenetic substantia?)

What is the role played by a CONGESTIVE or Hypoxic or other local factors that provide accumulation of catabolic- immune products and responses whit phenotypic new expression?

Many pathologic moves provides signaling to gene expression, and is possible to observe this phenomena in local place. (Equal genoma in the same organ or apparatus but different phenotypic expression in a part of this same organ or tissue in similar toxic environment)

This are only stocastic event? Or caused only by exogenous toxic factors?

Is a reaction towards local pathologic- toxic local environment?

Is the same statistics of cancer presentation in characteristic topography and epidemiology that make possible to think to this hypotesys.

The same probability in exposition to a toxic movens in the same organ not produce cancer in all cells of the organ but first in a determinate local place.

Endogenous toxicology and cancer topography in anatomic science make possible to better verify the relationship between kradients, kinetics, pathogenesis and local time related toxic condition.

Stocastic event can explain all kind of cancer or are involved also local time related pathologic- toxicologic movens? (esogenous or also endogenous?)

A multidisciplinary approach (statistics, epidemiology, organ topography, local conditions, lifestyle factors

Gradients of some factors, time of exposition, and the kinetics of the presentation of some kind of cancer in the same organ are the right instrument for set the pathogenesis of the cancer disease making possible to control also endogenous pathological toxicological movens time related.

In colon cancer is clear the factor played by kind of diet in advanced or not advance countries , in north or south of world and this must be taken in great consideration to introduce new “depurative methods” to reduce exposition of this kind of toxic products.

Topography of organ and apparatus, role played by congestive circle, proximity to other anatomic structure and related influx must also to be considered to explain some statistical difference in presentation of cancer

in the same organ – apparatus as reported in the literature reported in this work.

Conflict of interest: The author declares there is no conflict of interest

Clarification:

This poster presentation is produced without any diagnostic or therapeutic intent only to produce new research hypotesys (is produced under a toxicological – pharmacological point of view)

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