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Design and Baseline Characteristics of Participants in a Phase III Randomized Trial of Celecoxib and Selenium for Colorectal Adenoma Prevention

Inhibition of mTOR Suppresses UVB-Induced Keratinocyte Proliferation and Survival
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Risk Stratification for Advanced Colorectal Neoplasia—Letter
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Risk Stratification for Advanced Colorectal Neoplasia—Response
Paul C. Schroy III

Correction: Phase IIa Clinical Trial of Curcumin for the Prevention of Colorectal Neoplasia

Acknowledgment to Reviewers
Colorectal cancer is the second leading cause of cancer-related deaths in the United States. Although noninvasive fecal blood tests are widely used for the early detection of colorectal neoplasia, these tests have limited sensitivity and specificity. Metabolomics can be used to identify and quantify small molecules. In this study, metabolite profiling of feces was evaluated as a potential noninvasive approach to identify biomarkers of colorectal carcinogenesis. The cover image shows time-dependent effect size differences in metabolite levels in feces from colon tumor-bearing mice vs. healthy mice. Feces were analyzed three, five, and seven weeks following six weekly injections of azoxymethane, a colon carcinogen, or saline. The levels of fecal metabolites progressively change as tumor burden increases. Metabolomic profiling of feces represents a promising method to noninvasively detect colorectal tumors. See article by Montrose et al. (beginning on page 1358) for more information.