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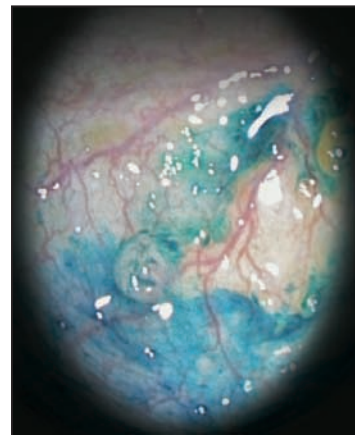
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- Acknowledgement to Reviewers.**588

About the Cover

The cover image is a photograph (courtesy of Elena M. Stoffel, M.D., M.P.H.) of a diminutive polyp (2 mm in diameter) identified during colonoscopic surveillance with chromoendoscopic enhancement in a patient with Lynch Syndrome. The polyp is the circular mound daubed with blue dye and located just below and to the left of center. During a typical chromoendoscopic examination, the colonoscope is advanced to the cecum, and upon withdrawal, the entire colorectal mucosa is sprayed with approximately 100 ml of a solution of 0.2% indigo carmine and simethicone (achieving a 20:1 ratio by volume). The mucosa is carefully examined for polyps or areas suspicious for neoplasia, which then may be biopsied for histopathologic characterization. Although dye-spraying may highlight mucosal irregularities that are less obvious with standard white-light endoscopic exams, the prevalence, character, and clinical implications of the small lesions detected during chromoendoscopy are a subject of considerable debate. See articles by Stoffel *et al.* (beginning on page 507) and Hawk and Guillem (beginning on page 495) for more information (also see Stoffel *et al.* in the November issue of *Cancer Prevention Research*, beginning on page 470).



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