COMMENTARY

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821 Efficacy of Difluoromethylornithine and Aspirin for Treatment of Adenomas and Ablerrant Crypt Foci in Patients with Prior Advanced Colorectal Neoplasms

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Aspirin, naproxen, and other nonsteroidal anti-inflammatory drugs (NSAIDs) are promising chemopreventive agents for individuals at high risk for colorectal cancer (CRC). However, uptake of chronic and continuous NSAID administration to reduce CRC risk is limited by unwanted side effects. Employing novel dosing regimens and an azoxymethane-induced rat colon cancer model, Mohammed and colleagues found that intermittent use of either aspirin or naproxen was highly effective in preventing the progression of colonic adenoma to adenocarcinoma without serious side effects (see the study beginning on page 751). These findings could ultimately impact the standard of preventive care for patients at the adenoma stage (i.e., in high-risk cohorts) to protect against advancement to invasive adenocarcinoma with intermittent NSAID use. The micrograph on the cover depicts hematoxylin and eosin staining of rat colon crypt, hyperplasia, adenoma, and adenocarcinomas that recapitulate the histological progression of human sporadic CRC.