

Preface

It was Aulus Cornelius Celsus, a physician in first-century Rome, who first defined *inflammation* as *calor* (heat), *dolor* (pain), *rubor* (redness), and *tumor* (swelling). However, it was Rudolf Virchow who in the mid-1800s linked inflammation with atherosclerosis, rheumatoid arthritis, multiple sclerosis, asthma, Alzheimer's disease, cancer, and other chronic diseases. The suffix “-itis” was introduced to indicate inflammation in words such as *bronchitis* (inflammation of the bronchus) and *colitis* (inflammation of the colon). Extensive research has revealed that inflammation precedes most cancers; for example, cancers of the liver, lung, colon, cervix, pancreas, stomach, and prostate are preceded by hepatitis, bronchitis, colitis, cervicitis, pancreatitis, gastritis, and prostatitis, respectively.

Within the past three decades, researchers have determined the molecular basis of most kinds of inflammation. Furthermore, various cell-signaling pathways that lead to inflammation have also been relatively well defined, leading to the development of various therapeutics that can modulate these pathways and thus alter the course of disease.

The current monograph deals with the role of inflammation in cancer, and some of the leaders in the field have contributed to this volume. We would like to thank these experts for their contributions and the publisher for giving us the opportunity to edit this volume.

Bharat B. Aggarwal
Bokyung Sung
Subash Chandra Gupta

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Aggarwal, B.B.; Sung, B.; Gupta, S.C. (Eds.)

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