

## 12th World Cancer Congress

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## **Ziding Feng**

The University of Texas MD Anderson Cancer Center, USA Strategies to improve early detection of Cancer

Cancer screening biomarkers promise far greater hope to creduce cancer mortality as compared to cancer treatment drugs. However, most cancer sites do not have effective screening biomarkers (body fluid or imaging). Why there is so big gap between the unmet needs and the potential huge benefit?

The major hurdles are: 1) low incidence of cancer in the general population, even in high risk population; 2) low cancer signal at asymptomatic stage; 3) lack of mechanism or incentive to translate a research assay to a clinical assay; 4) cost and benefit dilemma (company vs societal); 5) appropriate roadmap for biomarker development and adoption; 6) rigorous evaluation of biomarker for its clinical application. Examples are used to illustrate these challenges and possible solutions.

**Conclusions:** Multi-disciplinary team with government, industrial, and academic partnership is required for attacking this problem. Developing and implementing the road map guided by a clear clinical goal is necessary for the success.

## **Speaker Biography**

Ziding Feng is a Professor, Kathryn O'Connor Research Professor, and Section Chief of early detection and biomarkers in the department of Biostatistics, and Co-Director of the Center for Global Cancer Early Detection at UT MD Anderson Cancer Center. He has completed his PhD from Cornell University. He has been the principal investigator of the Data Management and Coordinating Center (DMCC) for the Early Detection Research Network (EDRN) since 2000, and of the Coordinating and Data Management Center for the Consortium to Study Chronic Pancreatitis, Diabetes and Pancreatic Cancer (CPDPC) since 2015. He also has a grant from NCI to incorporate biomarkers to improve lung cancer risk prediction model using PLCO specimens and data. He is the coordinating center PI for a study funded by Cancer Prevention Research Institute of Texas (CPRIT) to establish a large cohort of cirrhosis patients to improve early detection of HCC.

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