Many cancers can be successfully treated, if detected early, and others can be prevented from developing thanks to advances in technology and research. By studying ways to hinder the initiation of malignancy, deter its progression and inhibit its recurrence, the Cancer Prevention and Control Program aims to ease the burden of cancer and reduce cancer-related illness and deaths.

Program members of the cross-disciplinary Cancer Prevention and Control Program, the largest program at the University of Arizona Cancer Center, conduct leading basic, clinical and population-based research into prevention, early detection, risk stratification and cancer control. Studies focus on risk factors—genetics, lifestyle, such as diet and physical activity levels, and environmental and occupational hazards—as well as identifying new genetic or blood-based markers of increased cancer risk, developing new preventative interventions and evaluating the efficacy and safety of chemoprevention agents in clinical investigations.

Additionally, through the Cancer Health Disparities Institute and the Partnership for Native American Cancer Prevention, members of the Cancer Prevention and Control Program are engaged in major efforts to reach underserved populations, reduce their cancer burden and encourage student interest in cancer-related careers.

**HIGHLIGHTS**

**PRIMARY PREVENTION**

Myra Muramoto, MD, has developed an in-person tobacco cessation training and office system intervention specially tailored for the unique needs of acupuncturists, chiropractors and massage therapists. She has developed a novel, web-based tool to assess practitioner competence in tobacco cessation behavioral intervention skills. The long-term goal is to help all practitioners integrate these recommendations into their routine practice.

**SECONDARY PREVENTION**

David Alberts, MD, and the Skin Cancer Program Project research team continue their decades-long progress in discovery and testing of new techniques and therapeutic strategies for skin cancer prevention. Clara Curiel, MD, is currently using advanced imaging modalities for whole skin scanning and mapping for use in patient screening and early detection.

**SUPPORTIVE CARE**

Surgical oncologist Robert Krouse, MD, is concerned about addressing the needs of patients with incurable cancers. Research is severely deficient and effectiveness has rarely been displayed by prospective trials. This prospective study will compare the current treatment algorithms of surgical and non-surgical approaches to malignant bowel obstruction in terms of minimizing days in hospital and improving quality of life.