Meet the New JNCCN!

This issue of JNCCN—Journal of the National Comprehensive Cancer Network is very important for me. When I was invited to serve as editor in chief early in 2014, I immediately began to think about what direction the journal should take. I knew we should consider its legacy, maintain diversity of content, and shape it as a home for a body of original research. What should that look like?

The legacy part was easy. JNCCN has always been an outlet for disseminating the NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines), with insights into selected aspects of the guidelines. I knew that shouldn’t change. But I also knew from serving as chair of an NCCN Guidelines Panel, that there was often “more to the story.” Respecting that, we’ve invited our Guidelines Panel Chairs to contribute to a new feature called, “Between the ’Lines.” Here you will find special commentary on their guideline or panel and its process. We hope it rounds out our dedication to the importance of quality care and practice guidelines.

The diversity part was a bit trickier. Guidelines and quality care beg for evidence-based medicine to guide the process, and health services research to ensure dissemination and assess outcomes. But at the same time, our ability to mine the human genome and create a basis for an individualized approach to care sets out a somewhat different paradigm. Why not recognize both as linked parts of a spectrum.

So you’ll notice a new feature, “Molecular Insights in Patient Care.” We’ve always had case reports, but going forward, these will be case reports in which molecular medicine plays a role in decision-making, addressing a feature of the case that allows for individualized treatment or management. Of course, we will always ask authors to put the experience into context and describe the evidence required to transport these observations into broader clinical utility.

To further address original research, you will gradually see this section expand, populated with research in health services and quality improvement in cancer care and management taking center stage. And we plan to cover the spectrum from risk reduction to disease management to palliation, just as we do with the NCCN Guidelines. We hope to become a home for the highest quality research in this area, and we will build a skilled army of talented reviewers to guide us in selecting papers with the highest scientific merit.

Finally, I hope JNCCN readers will indulge me as I shape my monthly editorials around topics that I think are newsworthy. In this feature, “Oncology Watch,” I write about things that are happening that affect patients or providers in clinical oncology. I’ve been at this for a while and I hope a few of you have noticed. And if you have something to add, please reach out. We love feedback!

So there you have it. A new JNCCN, and my reputation is on the line. Wish us luck!