

Overview of Cancer in Children along with its Preventive Measures

N Okamoto^{1*}, AA Renshaw²

¹Department of Epidemiology, Kanagawa Cancer Center, Yokohama, Japan; ²Department of Pathology, Baptist Hospital of Miami, Miami, Florida 33176, USA

DESCRIPTION

Cancer is a disease caused when cells divide uncontrollably and spread into surrounding tissues. Cancer is caused by changes to DNA. Most cancer-causing DNA changes occur in sections of DNA called genes. These changes are also called genetic changes. These cells produce a mass termed a tumor in most of the cancers. Tumors can be malignant or noncancerous. A malignant tumor has one that has the potential to develop and spread to other regions of the body, a benign tumor that can develop but will not spread to other parts of the body [1-4].

Cancer in children and adolescents as a growing body of research is being conducted on cancer and diagnosed beyond the age of 14. Because these children are approaching early adulthood, they may have medical, social, and emotional demands that are distinct from those of younger cancer patients. Adolescents and young adults are the terms used to describe them. Infants and adolescent with cancer should be treated at a pediatric oncology facility the majority of the time. They should ideally be treated at a facility where medical oncologists (doctors who treat cancer in adults) and pediatric oncologists (doctors who treat cancer in children) collaborate on treatment. This will guarantee that they receive the most up-to-date therapies and that they are well taken care of.

Types of cancer that develop in children

The kinds of diseases that happen most frequently in youngsters are not the same as those found in grown-ups. Most commonly recognized diseases of adolescents are:

Leukemia: Leukemia is a malignancy of the blood cells that affects the bone marrow and lymphatic system. There are various types of leukemia. Certain types of leukemia are more common in children. Adults are more likely to develop other types of leukemia is a type of cancer in which white blood cells are affected. The white blood cells are effective infection fighters, and they grow and divide in a regular pattern as the body requires. However, in leukemia patients, the bone marrow develops an overabundance of aberrant white blood cells that do

not function properly. Treatment for leukemia can be difficult depending on the kind of leukemia and other factors. However, several tactics and tools can create aid in the effectiveness of the treatment.

Brain and spinal cord tumors: Brain and spinal tumors are the second most prevalent malignancies in children, accounting for around 26% of all cancers in children. There are several types of brain and spinal cord tumors, each with its therapy and prognosis. Most of the children's brain tumors begin in the lower brain, such as the cerebellum or brain stem. Headaches, nausea, vomiting, blurred or double vision, dizziness, seizures, difficulty walking and other symptoms are all possible. Spinal cord tumors are less common in both children and adults than brain tumors.

Lymphomes: Lymphomas begin in lymphocytes, which are immune system cells. The lymph nodes or other lymph tissues, such as the tonsils or thymus, are the most common sites for these malignancies to begin. They may cause injury to the bone marrow and other organs. Weight loss, fever, sweats, exhaustion (fatigue), and lumps (swollen lymph nodes) beneath the skin in the neck, armpit, or groin are all symptoms that depend on where the cancer develops.

Hodgkin lymphoma (also known as Hodgkin disease) and non-Hodgkin lymphoma are the two most common kinds of lymphoma. Both children and adults exhibit both kinds.

Hodgkin lymphome: About 3% of all pediatric malignancies are caused by this. However, it is more frequent in early adulthood (typically in adults in their twenties) and late adulthood (after age 55). In children under the age of five, Hodgkin lymphoma is rare. This form of cancer is extremely similar in children and adults, including the treatment options that are most effective.

Non-hodgkin lymphoma: About 5% of all pediatric malignancies are caused by this. Although it is more prevalent in mostly young children than Hodgkin lymphoma, it is still infrequent in children under the age of three. Non-Hodgkin lymphoma in children is distinct from non-Hodgkin lymphoma in adults. These malignancies develop fast and require aggressive therapy,

Correspondence to: N Okamoto, Department of Epidemiology, Kanagawa Cancer Center, Yokohama, Japan, E-mail: okamoto@gancen.asahi.yokohama.jp

Received: 03-Jan-2022, Manuscript No. CPOA-22-15781; **Editor assigned:** 05-Jan-2022, PreQC No. CPOA-22-15781 (PQ); **Reviewed:** 19-Jan-2022, QC No. CPOA-22-15781; **Revised:** 24-Jan-2022, Manuscript No. CPOA-22-15781 (R); **Published:** 31-Jan-2022, DOI: 10.35248/2572-0775.22.7.199

Citation: Okamoto N, Renshaw AA (2022) Overview of Cancer in Children along with its Preventive Measures. Clin Pediatr .7: 199.

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but they also respond to treatment better than other adult non-Hodgkin lymphomas.

Cancer prevention

Don't use tobacco: Tobacco use, in any form, sets on a collision path with cancer. Various forms of cancer, including lung, mouth, throat, larynx, pancreatic, bladder, cervix, and kidney cancer, have been related to smoking. Tobacco chewing has been related to cancers of the mouth and pancreas. Exposure to secondhand smoke, even if they don't use tobacco, may raise the risk of lung cancer.

Eat a healthy diet: Even though making sound choices at the supermarket and at supper time can't ensure disease anticipation, it may diminish the danger.

Eat plenty of fruits and vegetables : The core of the diet should include fruits, vegetables, and other plant-based foods like whole grains and legumes.

Maintain a healthy weight: To reduce weight and get leaner, eat less high-calorie meals like refined carbs and animal fat.

Use sunscreen on a daily basis: Safeguarding skin from the sun will lessen skin disease hazards. Use sunscreen with a sun assurance factor (SPF) 15 or higher, apply day by day when the youngster will be outside, Pick expansive range UVA/UVB inclusion, Use caps and shades notwithstanding sunscreen.

Get regular medical care: Regular self-exams and screenings for malignancies of the skin, colon, cervix, and breast, for example, can improve the chances of detecting cancer early, when

treatment is most likely to be effective. To establish the optimum cancer screening schedule for to speak with the doctor.

CONCLUSION

Any comprehensive cancer care strategy should include a plan for cancer diagnosis and treatment. A diagnostic and treatment program must never be established in isolation if it is to be effective. It must be linked to an early detection program so that instances may be identified at an earlier stage when treatment is more effective and the likelihood of cure. It should also be combined with a palliative care program so that patients with advanced malignancies who are no longer able to benefit from therapy can get enough comfort from their body.

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