**Exploration of New Pathways in Oncology**

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**Abstract:** To date, immunization has consisted of two principle pathways: (1) replication of infective agent; (2) enhancement of immune function. Given the lack of success of the two current pathways, the current researcher (author) has conceptualised (developed) the new, or third, pathway of site attachment inhibition. The methodology surrounding site attachment inhibition therapeutics has been discussed in previous lectures (Reference Citations 1-9). It involves both medication based treatment of established infections and preventative immunization (new generation; stem cell therapy based).

New generation immunization involves stem cell therapy (including mutagenesis and knockout) of particular genetic targets such to achieve immunity (resistance) to infectious agents that is similar to what occurs with hereditary genetic variations/mutations).

The methodology for identifying genetic targets has been discussed in previous lectures. In brief, [References 7 – 9] “Using methodology relating to CRISPR, CRISPR Cas 9 and related technologies would allow comparison between cells in which entry of the pathogen is occurring to those in which entry of the pathogen is not occurring (or, not able to) and through analysis of the genetics of the human cellular biology used by the pathogen to gain cellular attachment (or, transfer and entry), the genes to be targeted in mutagenesis and knockout can be analysed. The pathogen machinery also is to be analysed.”

From the above, it is clear that the current research has directed a methodology that encourages ascertainment of the genetic targets by way of first principles as opposed to direct copying. Direct copying may be considered a more ownership type attitude toward the genetics of humans and other species.

The above seems in line with the following:

Molecular Pathology v. Myriad Genetics (BRCA gene case) in which it was found that genetics are not able to be patented but treatments targeting genetics are able to be patented. Ownership attitude of treatments but not actual genetics of humans and other species was supported.

Ethics approval for CRISPR in trials for stem cell therapy based immunization to infectious agents including HIV has been provided in a number of countries including that in UK.

The importance to Oncology is now drawn:

Gardasil is an immunization that utilises Pathway 2 above which as a conjoined benefit prevents cervical cancer.

It is therefore interesting to consider whether Pathway 3 through similar methods to the new generation immunization discussed could similarly be explored as preventative treatment for cancers. It is further interesting that preventing HIV (E.g. as detailed in lectures on stc based immunization) may in some respects prevent certain Kaposi Sarcoma.

**Summary:** This lecture details site attachment inhibition with a focus on new generation immunization. The lecture explains that immunology is actually of interest to oncology. Specifically, Gardasil utilises Pathway 2 and by way of preventing infectious disease also prevents cervical cancer. The lecture then presents why it would be perhaps worth exploring whether Pathway 3 could also be explored in Oncology for successful treatment (preventative) of cancer.

In conclusion, the focus of Pathway 3 perhaps should not only be regarding immunization but also treatment (preventative) for cancer.

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**Biography:** Simon Raymond is a Consultant specialising in Medical and Scientific Research and an Alumnus of Melbourne University (Rank of Number 1 in Australia and Number 33 in the World). The above stated Researcher has acted as a Reviewer for the respected Medical Journal of Australia, has received invitations internationally to review from prestigious medical journals including Journal of American Medical Association Network. He has received award in recognition of his research by Royal Australasian College of Surgeons (PSC, 2006) and invited to conferences internationally as an official Delegate and Researcher, including that in USA and China. He has worked as the Principle Researcher in the highest-powered form of medical trial—Randomised Controlled Trial (RCT). The above stated Researcher is also a Member of the Golden Key International Society for Honoured and outstanding Academics and has been cited as a Notable Global Leader. Dr Simon Raymond’s research has been indexed by well respected universities including Cornell University.