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Letter to the Editor

Comment on: LncRNA SBF2-AS1 promotes hepatocellular carcinoma metastasis by regulating EMT and predicts unfavorable prognosis

Dear Editor,

The last worldwide evaluation on HCC impact and alarm refer to 2012[1] with dramatic information in term of incidence rate and survival outcome. Despite the fact that more than 6 years are passed, the HCC represents, still nowadays, one of the main oncological diseases in terms of incidence and negative survival rate with worrying incidence also in many industrialized countries[2]. Scientific evidence highlights how antioxidant[3] as well as nutraceutical agents[4] can reduce the risk to develop the HCC, but it is not enough in order to fight its progression and metastasis[5]. Several mechanisms of action and markers were discovered for the HCC[6], laying the foundations of the future innovative therapies and diagnosis approaches. In this scenario, we read with great interest the article of Zhang et al[7]. They evaluated and disseminated the role of the LncRNA SBF2-AS1 in HCC patients. Starting from patients' data, they focus on the LncRNA SBF2-AS1 levels via bioinformatics and qPCR approaches. The data outcome correlates with the SBF2-AS1 up regulation in HCC. Moreover, the authors investigated the clinical features and prognosis in HCC patients in correlation with the SBF2-AS1 levels. Vein invasion and TNM stage, together with the low survival rate strongly correlate with the high levels of LncRNA SBF2-AS1. On the other hands, the suppression of SBF2-AS1 directly reduces the HCC proliferation and invasion acting on EMT pathway. The Zhang et al[7] paper is oriented towards the new frontiers of precision medicine passing by the patients stratification[8]. The final goal of last decade oncology research aims to provide the right therapy to the right patient[9,10].

Concerning the fact the LncRNAs associated with HCC molecular mechanisms is grooving[11], the LncRNA SBF2-AS1 should be considered pivotal for as possible new diagnostic marker and therapy in HCC patient. Indeed SBF2-AS1 could represent a new source as druggable target able for innovative HCC treatment. Future studies[12] should try to elucidate the potential interplay of mechanism in HCC initiation, progression and fate among the genetic and epigenetic mechanisms.

Abbreviations

EMT = epithelial-Mesenchymal Transition; HCC = hepatocellular carcinoma; LncRNA = Long non-coding RNA; qPCR = quantitative polymerase chain reaction; TNM = Tumour, Node, Metastasis.

Conflict of interest

The authors declare no conflicts of interest.

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