

Editorial

Editorial for *Cancer in the Ageing Host*

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Studying the intersection of ageing and cancer research is particularly important because it highlights not only the biological complexities of both disciplines but also the critical need for collaborative, cross-disciplinary efforts. As our understanding of the ageing immune system develops, it becomes clear that age-related changes can profoundly influence both the development of cancer and the response to treatment. Addressing these challenges requires innovative research strategies and dedicated platforms for sharing new discoveries. Recognizing these urgent needs, our new journal seeks to bridge the gap between gerontology and oncology, fostering dialogue that accelerates progress in both domains. By prioritizing studies that address the unique biological, clinical, and social factors affecting older cancer patients, we aim to provide a comprehensive platform where innovative ideas and collaborative projects can flourish. Our commitment is to serve as a hub for the exchange of knowledge and to inspire actionable insights that ultimately improve outcomes for ageing populations.

In launching this journal, we also acknowledge the vital role of community engagement and the value of diverse perspectives. We encourage contributions from researchers, clinicians, caregivers, and patient advocates, recognizing that multifaceted input is essential to advancing science and improving care for older adults with cancer. Together, we can build a vibrant, forward-thinking community dedicated to unraveling the complex interplay between ageing and cancer.

My own research career began in the Department of Surgery, Cambridge University, UK in transplantation immunology, facing the problems of immunosuppression to prevent organ rejection and attempts to obviate this by tissue matching, pharmacological agents and immunological tolerance induction. Moving to hematopoietic stem cell transplantation for leukemia (in those days, simply bone marrow transplantation) not only exacerbated the challenge of tissue matching but also focused attention on the ability of the immune system to control cancer. From here, it was a short step to establishing in vitro models of anti-cancer immunity to understand the mechanisms involved in mediating anti-tumour immunity. With the advent of “T cell growth factor” (predominantly what was later designated IL-2), it soon became clear that the prime anti-tumour immune effectors (T cells) could be maintained as clonal populations in vitro, with a view to enriching T cells with receptors specific for tumour antigens which could then be infused back into the patient. However, it also soon became clear that T cells could not be expanded indefinitely in culture, as had been known for well over a decade in the case of human fibroblasts (the “Hayflick Limit”). But immunologists were not aware of this - hence this is just one illustration of scientists working in different fields being ignorant of each other’s work. Despite insistent calls over the years for interdisciplinary research, it has been my long-standing experience that overcoming the compartmentalization of different disciplines remains a major challenge in most fields, in particular when considering the marriage of clinical and biological research. In an effort to overcome this problem, I have led many multidisciplinary projects in the field of the biology of ageing and in the field of cancer immunology—but attempts to combine both disciplines in a single project consistently failed to win funding.

This long-standing issue led me to work on the impact of immune ageing on the success of cancer vaccination and other immunotherapies, and the effects of age in general on cancer outcomes. Most clinical trials did not (and do not) specifically consider the effect of patient age on outcome and may even exclude older individuals, despite the fact that most solid cancers are age-associated diseases. This provided the motivation to attempt to found a new journal because there were still very few or no journals specifically addressing research to help the older cancer patient (or even the older mouse...)—an important omission, even though some may think that we are



already drowning in new journals. “*Cancer in the Ageing Host*” will try to fill that gap and is dedicated to the promulgation of research addressing how ageing affects carcinogenesis and host-tumor interactions in humans and experimental models. The overriding aim of the journal is to contribute to the better understanding of *Cancer in the Ageing Host* and to improved treatment of the older adult. As founding EiC of *CAH*, I would like to see the Journal develop into a trusted go-to source of information on all aspects of cancer in the ageing context. We will perform due diligence in peer review of all submissions and aim to avoid any possibility of impropriety in everything we publish. All papers must conform to accepted standards of transparency and ethics, as in any rigorous scientific publication following the principles established by the Committee on Publication Ethics (COPE). I look forward to *CAH* making a seminal contribution to the knowledge base on this increasingly important topic, as global populations age and cancer in the older individual becomes ever more a public health concern worldwide.

Conflicts of Interest

The author declares no conflict of interest.

Use of AI and AI-Assisted Technologies

During the preparation of this work, the author used Google AI for on-line searches. After using this tool, the author reviewed and edited the content as needed and takes full responsibility for the content of the published article.