



## Lymph Node Dissection in Colorectal Cancer

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### Message from the Guest Editor

Colorectal cancer (CRC) has been diagnosed at an early stage more frequently due to the recent advances in endoscopic techniques. Even for patients with early-stage CRC, clinicians must consider the type of treatment and the depth of submucosal invasion is considered the most important factor in determining a suitable treatment strategy. Surgical resection of CRC is the cornerstone of the treatment. However, the incidence of anastomotic leakage (AL) is high, and the postoperative mortality is therefore high due to AL. There is a general consensus that comorbidities play a crucial role in the outcome of the surgery. Recent reports have suggested that older patients with certain risks could be overtreated. Overtreatment results in the possibility of subsequent excess morbidity and mortality.

Patients also need to consider radical resection, oncological resection, and surveillance. Therefore, accurate risk stratification and predictive tools are highly valued to help them in this decision-making process. Here, we discuss the risk factors of LNM in CRC patients and the technology, strategy, and the future.

In this Special Issue, original research articles and reviews are welcome.





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## Message from the Editor-in-Chief

*Cancers* (ISSN 2072-6694) is an international, online journal addressing both clinical and basic science issues related to cancer research. The journal will continue its open access format, which will certainly evolve to ensure that the journal takes full advantage of the rapidly changing world of information and knowledge dissemination. It publishes high-quality clinical, translational, and basic science research on cancer prevention, initiation, progression, and treatment, as well as other related topics, particularly to capture the most seminal studies in the rapidly growing area of immunology, immunotherapy, and tumor microenvironment.

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