

Special Issue

Surgery or Radiotherapy for Primary and Oligometastatic Lung Cancer

Message from the Guest Editor

In the past, the treatment decision was often easy: surgery for early lung cancer, radio-chemotherapy for locally advanced disease and a systemic treatment for metastatic disease. The progress made in different disciplines has led to a more sophisticated approach questioning the role and position of surgery or radiotherapy for early lung cancer but also in case of more advanced tumors. Surgery has evolved to a less invasive procedure with the introduction of video-assisted thoracic surgery, leading to a rapid recovery procedure and lower toxicities. In the area of radiotherapy, the technique has evolved to more precise targeting of the tumors with the introduction of intensity-modulated radiotherapy (IMRT), stereotactic ablative radiotherapy (SBRT) and adaptive radiotherapy, stereotactic body radiotherapy and on- line imaging procedures.

The type of radiotherapy and surgery are also now more often discussed for the management of early lung cancer. The population aging, facing the issue of co-morbidity; screening programs have allowed more very early lung tumors to be found. Should we still apply our old approach or should we adapt our treatments?

Guest Editor

Prof. Dr. Paul Jules van Houtte

Department of Radiation Oncology, H.U.B. Institut Jules Bordet, Université Libre Bruxelles, Meylemeersch 90, 1070 Anderlecht, Belgium

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Editorial Office
MDPI, Grosspeteranlage 5
4052 Basel, Switzerland
Tel: +41 61 683 77 34
cancers@mdpi.com

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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.

Editor-in-Chief

Prof. Dr. Samuel C. Mok

Department of Gynecologic Oncology and Reproductive Medicine, The University of Texas MD Anderson Cancer Center, Houston, TX 77030, USA

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