Special issue on complex aerodigestive endoscopy

Over the past two decades, general thoracic surgery has moved away from large, debilitating thoracotomy, to minimally invasive approaches, with thumb nail sized incisions and the use of high definition cameras for optimal visualization. But the skill set of the general thoracic surgeon is not limited to the use of the scalpel. Mastery of the *per os* flexible endoscope, both through bronchoscopy and esophagogastroduodenoscopy (EGD), enables the thoracic surgeon to provide leading edge clinical value to his or her patients.

This special issue of the Journal of Visualized Surgery (JOVS) illustrates novel and complex endoscopic approaches to manage general thoracic surgical problems. Each article provides clear visuals to assist general thoracic surgeons in modernizing their practice. Much of the diaspora of aerodigestive endoscopic techniques are addressed, such as endoscopic fundoplication for reflux disease, per oral endoscopic myotomy for achalasia, endoscopic mucosal ablation and resection of Barrett's metaplasia and other diseases, navigational bronchoscopy localization of lung nodules for resection, endobronchial thermoplasty for asthma, endobronchial lung volume reduction surgery and airway stenting for tracheobronchomalacia.

This JOVS compilation, "Complex Aerodigestive Endoscopy", provides a blueprint for general thoracic surgeons to use to adopt advanced aerodigestive endoscopic technology for the safe, innovative care of their patients. The authors are commended for providing their expertise and educational insight to the international surgical community.



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