

Our current era has witnessed more than just technological advances in how we perform surgery. It has also seen an incredible dissemination of knowledge among the entire world. With the internet came easy access to data on all the different options for treatment of disease, information once held only by medical practitioners. Patients can now compare different modalities before deciding on their treatment and have appropriately become the driving force in where our priorities in health care should lie. Indeed our patients have spoken and one of their main priorities is minimally invasive surgery, that catchall phrase which simply means doing the operation with the least harm while trying to achieve the same results. To accomplish this priority the last 30 years have undeniably been revolutionary with video assisted intracavitary surgery becoming accessible to almost every part of the human body. More recently, another disruptive technology, computer assisted surgical machinery or “robotics” came along. The ability to use miniaturized articulating instruments inside a cavity with state of the art optics provides an experience for the surgeon that had never been previously appreciated. The surgeon can now perform maneuvers that were hitherto only possible by open surgery, such as bimanual dissection and suturing, the basic principles of sound surgical technique. Of course, this technology does not come cheap. Despite its uncontested technical superiority, the cost of robotic surgery will have to be offset by significant advantages not just to the surgeon but also to the patient and society at large.

The title of this book, *Robotic Thoracic Surgery: Ruijin Hospital Experience* is deceptively simple. One may assume that it is just another manual for surgical procedures that pertains only to Ruijin hospital. However, the old adage of not judging a book by its cover, or in this case its title, certainly applies. On careful review of the topics, the reader finds that they actually cover the entire gamut of robotic thoracic surgery. To this end, editors Li and Xiang have certainly amassed some of the most renowned Chinese and international experts in the field of RATS to author this book. The excellent chapters provide well-crafted and beautifully illustrated details of lung, esophageal and mediastinal procedures. More importantly, they also delve on other issues such as cost, perioperative management and surgical team collaboration; essential components toward building a successful robotic assisted thoracic surgery (RATS) program. One readily realizes that this book can in fact become a useful compendium for thoracic surgeons worldwide.

Although the Ruijin Hospital robotic surgical experience is relatively young, it has quickly become one of the highest volume centers in the world for RATS. I have personally witnessed how this program has grown to become one where the most advanced thoracic procedures are routinely done by robotic minimally invasive techniques. Indeed, the “Ruijin experience” can become a model for how to become a world class center in this field. As a contributor to the book, I have the distinct honor of being part of this valuable fund of knowledge.

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