# Surgical approaches to video-assisted thoracic surgery lobectomy: a brief preface

Approximately two decades ago, thoracic surgery witnessed the leap from thoracotomy to the first video-assisted thoracic surgery (VATS) lobectomy. VATS lobectomy is now widely established as a safe and oncological sound technology that is the standard of care for early-stage lung cancer. Reduction of trauma, bleeding, pain, hospitalisation time and recovery for the patient, these, in short, the main advantages of minimally invasive surgery that for several years is now increasingly replacing the traditional thoracotomy in many pulmonary surgical indications. The move toward less invasive surgery has no doubt driven the innovation of sophisticated instruments and technology to cope with the demanding need of working through a restricted incision. VATS for the treatment of lung cancer (the big killer for which over 28,000 people die in Italy every year) is practised in centres where surgeons have had specific training.

The 26th–27th April 2018, in Teramo and Giulianova Terme (Italy), Prof. Roberto Crisci arranged a conference, with the major Italian and European thoracic surgery experts, dedicated to VATS in the treatment of lung cancer (specifically VATS lobectomy). The conference, divided into 2 days, scheduled a day of live surgery from the operating rooms of the Hospital of Teramo with the presence of two leading European experts of VATS lobectomy, Prof. Joel Dunning from Middlesbrough (UK) and Prof. Thomaz Stupnick from Ljubljana (SLO) who interacted with Italian experts and colleagues.

The papers, which are collected in this thematic issue of the *Shanghai Chest*, aims to present and to publish the experience and technique for VATS lobectomy shared by the world-known experts based on clinical or experimental studies of different centres performing VATS lobectomy. Through this issue, we hope to update the international literature on this topic and share different international experiences on surgical approaches to VATS lobectomy, as well as to provide young surgeons with a comprehensive discussion.

## Acknowledgments

## Footnote

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