

The surgical techniques for thymic lesion have been evolved from open sternotomy to minimally invasive surgery with the improvement of the VATS and robotic techniques. Historically, open sternotomy has been a standard approach for thymoma and thymic carcinoma to guarantee the best access for bilateral mediastinal fat and cervical thymic lesion and to achieve the best surgical outcomes. However, we already have encountered the era of minimally invasive surgery that VATS or Robotic surgery is not a circus only played in a limited center. Furthermore, the number of surgeons who perform a single-port or subxiphoid approach for the thoracic disease has been increasing, and they are challenging the future. So, we reviewed these innovative surgical techniques for minimally invasive thoracic surgery which have been changing our current surgical procedures to more favorable one for the patients who need surgery. Now, we have many surgical options for who are not eligible to perform thymectomy through open sternotomy for various medical conditions and for whom are aware of postoperative morbidity or big wound at anterior chest.

The first edition of Minimally Invasive Thymectomy was developed and executed by honorary editor Jianxing He who brings an international reputation for the development of minimally invasive thymectomy, single-port, and subxiphoid approach for the thoracic disease. This book is a collection of 46 published articles on AME journal written by leading experts in minimally invasive thymectomy. The topics of this textbook divided into three major sections. These include: "Summary of Minimally Invasive Thymectomy"; "VATS Thymectomy"; and "Robotic Thymectomy." Each section includes recently published clinical articles with up-to-date surgical techniques for minimally invasive thymectomy by expert thoracic surgeons. The authors discuss their clinical experiences and cases of minimally invasive thymectomy including VATS and robotic surgery with various innovative techniques.

I guess this book is a resource well suited to the thoracic surgeon and their young trainees, who are willing to perform the minimally invasive approach for the thymic disease. The numerous illustration and figures for surgical approach will give guidance for the thoracic surgeons to complete their surgery successfully and reduce the learning period of various minimally invasive approach for thymectomy. Furthermore, this book includes the recently up-to-date outcomes of VATS and robotic thymectomy to provide evidence to their clinical field.

I hope to provide a reference to the thoracic surgical experts and their trainee, and the readers find the first edition of Minimally Invasive Thymectomy to be a valuable reference in the treatment of thymic disease.



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