More than five decades after the first report of human lung transplantation in 1963, lung transplantation has become a widely accepted and relatively successful treatment modality for advanced lung disease and respiratory failure, currently performed in many parts of the world. Initial attempts in lung transplantation were hampered by surgical anastomotic complications and lack of adequate immunosuppressive agents until 1980's when first successful combined heart-lung and isolated lung transplants were performed. Initial technical advances and development of surgical innovations in anastomotic techniques of 1980's were followed by the performance of pediatric lung transplantation, living lobar transplantation as well as medical progress in immunosuppressive regimens, infection prophylaxis and general patient management in 1990's. Along with a major growth in volume of lung transplants since mid to late 1990's, the clinical experience has also grown and matured in the new millennium. Survival of lung transplant recipients has improved although this improvement occurred mostly in the first postoperative year leaving all of us with the task of finding alternative strategies to replace generalized immunosuppression and develop better preventive and therapeutic measures for chronic lung allograft dysfunction in the future. Nevertheless, there have been tremendous progress in lung transplantation in the past decade, some of which include dramatic changes in lung allocation and preferential distribution of lungs to very high acuity pretransplant candidates, new measures to successfully bridge them to transplant, donor management and selection, lung preservation and assessment tools including machine perfusion, and postoperative care and support of very sick patients.

"From Lung Transplantation to Heart-Lung Transplantation" is a book consisting of a collection of articles, published recently by world-renowned experts in the field. Many of the aforementioned advances in lung transplantation are reviewed in this book. Furthermore, the book also contains articles about important topics such as donor selection, immunosuppressive therapy, acute rejection and chronic lung allograft dysfunction as well as a discussion of controversial topics in lung transplantation, such as single versus bilateral lung transplantation. Selected rare complications including hyperbilirubinemia and Mycobacterium tuberculosis infection following lung transplantation are also included.

What separates this book apart from other similar, recent publications is the inclusion of a sizable section on heart-lung transplantation in an era when very few (~50/year worldwide) heart-lung transplants are being done with many centers losing their expertise in this field. There is a detailed review of the surgical technique, which is hoped to be very useful for aspiring young cardiothoracic transplant surgeons as well as a discussion on indications and patient selection for heart-lung transplantation both in adults and in pediatric patients.

I hope that this book will serve as a valuable resource regarding some of the most important topics in lung and heart-lung transplantation for the transplant community, especially for trainees, transplant coordinators and junior faculty, who will find a great deal of vital information all under one cover.

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