

A database is nowadays mandatory for the thoracic community

This special issue of the *Journal of Thoracic Disease (JTD)* represents the first collection of invited articles dealing with all the spectrum of databases in the field of thoracic surgery, organized under the umbrella of the European Society of Thoracic Surgery (ESTS).

ESTS has rapidly become the largest organization representing general thoracic surgery worldwide. Consequently the idea of running its own database soon appears as evidence. The first attempt was done in 2001 thanks to the work of Tom Treasure; the current online version was launched in 2007.

It was a pleasure and privilege for me, as ESTS database director, to coordinate and edit this special issue. I did my best to select what I thought was the most helpful, interesting and innovative subjects from world-renowned experts to construct the final list of topics. In this issue, topics include “basic” and more “advanced articles”, as well as “state of the art” and “new concepts” in the ever-burgeoning data fields. It is indeed important to situate the global activity in the framework of database. Articles dealing with the creation, maintenance and quality of data can be considered as the backbone of this issue. More advanced articles and new concepts, covering specific fields such as of research, accreditation, auditing, and international collaborations (inside as well as outside Europe) are really worth reading because they successfully open one door leading to ten more! Finally, the stimulating state of art provided by the fourth articles focusing on ESTS satellite database (thymic, chest wall, mesothelioma, and neuro-endocrine tumors) appropriately investigate and help to clarify some of the uncertainties in these areas.

Why should the thoracic community be considered with the use—and findings—of a database? Not only because medicine as a whole and our specialty in particular is entering in the “big data era”; rather because a well-structured, organized and reliable database, such as the ESTS database, obviously helps to raise and solve crucial questions from the standpoint of surgical care. For example and amongst many others, the identification of sub-populations of patients who would benefit (or not) from a given surgery, the inclusion of 90-day mortality in data collection, or the estimate of prognostic models of survival after lung cancer surgery are currently of utmost importance.

I am deeply indebted to all the authors who contributed to the realization of the present volume. This issue is dedicated to all surgeons and allied health professionals who with their daily commitment and passion help advance our specialty and assure patients a high quality of care, a better quality of life and an improved long-term survival.

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