

Thoracic surgery worldwide

Starting in this series, the *Journal of Thoracic Disease (JTD)* is launching a new regular feature entitled "Thoracic Surgery Worldwide". The aim of this series is to showcase the status of thoracic surgery around the world.

Today, thoracic surgery is one of the most rapidly developing specialties in all of surgery—both technically and technologically. Spectacular advances in minimally invasive approaches, peri-operative care, and integration of surgery into multi-modality treatment of chest diseases have contributed to fantastic progress in surgical outcomes for patients. Elements such as uniportal surgery, elective segmentectomy, enhanced recovery programs, and adjuvant target therapy for early-stage lung cancer are no longer novelties. These and other developments are increasingly seen as key components of modern practice that mean patients undergoing chest operations nowadays may experience outcomes dramatically better than just a decade ago.

However, behind each of these innovations is a unique story of research and development. Behind each institute adapting a new technique or technology lies a different set of challenges. It is important to appreciate that Thoracic Surgeons around the world face very different circumstances when crafting or accessing such advances. Different countries and regions will have different areas in which they have excelled or accumulated particular experiences. They may also have different foci for clinical research or different priorities for service development. Appreciating how Thoracic Surgery advances have been made and assimilated in different parts of the world provides invaluable lessons for future progress.

The "Thoracic Surgery Worldwide" series aims to give readers an introduction to the current status and future directions of this specialty in various regions of the world. Each article in this important series will focus on one country of region, and will be authored by a thoracic surgeon recognized as a leader in the specialty in their own country or region. Readers may learn from the best practices of international peers, benchmark their own work, gain inspiration for research, see opportunities for training abroad, and better appreciate the proud progress our specialty has made worldwide.

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Footnote

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