## Surgery of the airway

The present issue of the *Journal of Thoracic Disease* is dedicated to Surgery of the Airway. This exciting field of thoracic surgery represents a major technical challenge that has registered a significant improvement over time, thus changing the modern approach to a number of benign and malignant diseases. Outlook for cure of benign tracheal and laryngotracheal stenoses and of neoplasms involving the airway has dramatically improved in recent years together with growing experience and progressive diffusion of reconstructive techniques.

Lesions affecting the trachea are quite uncommon and only few centers worldwide have collected large experience in this setting. This volume offers contributions from some of the main experts in airway surgery with the aim of improving knowledge and providing a guide for surgeons and physicians facing clinical airway problems.

The first tracheal resection was performed more than 100 years ago, and substantial progress has been made over the last decades. Since the early 1970s, when the principles for a safe laryngotracheal resection have been first described, surgical treatment has offered a chance for definitive cure even to patients with benign subglottic stenosis, for whom palliative procedures had been the rule for a long time.

Technical aspects and results of some of the pilot experiences with prosthetic tracheal replacement have been also included in this volume.

Airway reconstructive procedures have also radically modified the surgical management of tumors invading the carina and main bronchi. Increased expertise and acceptance of these techniques have allowed to enlarge the spectrum of operable tumors and to standardize healthy lung parenchyma sparing in the treatment of many patients with centrally located neoplasms. Progressive affirmation of minimally invasive approaches has become a current trend also in this field of thoracic surgery, as proved by the initial experiences reported with video-thoracoscopic or robotic sleeve resections. Interesting chapters by eminent colleagues discussing the role of the latter approaches in such complex operations are part of this volume.

Special attention has been dedicated to technical details of anastomotic reconstruction including those concerning lung transplantation, and to risk evaluation, treatment and prevention of complications.

Endoscopic treatment has a crucial role in the management of airway diseases. Clinical judgment and large specific experience is essential to define the correct indications for such procedures. Operative endoscopy should be considered an additional resource for surgery allowing to improve results of treatment and to avoid unnecessary operation.

We thank all the authors who have participated in this project. We are convinced that their outstanding contribution will provide the readers with a comprehensive overview of the state of the art of this complex and interesting topic.



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