Metastatic non-small cell lung cancer (NSCLC) was historically managed with systemic therapy aiming at controlling the cancer and prolonging life but with very limited success. In 1995, Drs. Samuel Hellman and Ralph Weichselbaum explicitly defined oligometastasis, which represents a clinical state where the number of metastatic sites and the extent of disease is limited, hence, is amenable to local metastasis-directed therapy including surgical extirpation or ablative radiotherapy, aiming to prolong survival and the period of cancer control. With the recent development of more effective biologically targeted therapies and immunotherapy, patients' survival outcomes have improved significantly. With the prolongation of survival, achievement of durable local control of limited metastatic lesions can potentially prevention of complications from progression of the metastatic lesions and prolong survival. Multiple retrospective studies and clinical trials showed promising results with the use of stereotactic body radiotherapy (SBRT) for oligometastases including those from NSCLC.

This book titled "Oligometastatic Lung Cancer" is a collection of articles contributed by renowned experts in this field from leading centers of excellence around the world and it provides a comprehensive review of various aspects of oligometastatic NSCLC.

There are three main sections, including research status, epidemiology, and treatment of oligometastatic NSCLC. In the first section, the authors cover various aspects of clinical and translational research in eight articles. The second section includes an article on the epidemiology of oligometastatic NSCLC based on a systematic review and pooled analysis. The last section is further divided into subsections including surgery, ablative therapy, radiotherapy, and ablative radiotherapy, immunotherapy, and local consolidative therapy. The five articles in the surgery subsection cover the evidence for surgery for oligometastatic NSCLC, appropriate surgical candidate selection, surgical approaches, the surgeon's role in oligometastatic NSCLC, and clinically prognostic factors in surgically treated patients, respectively. The next section on ablative therapy includes three articles with one editorial on ablative therapy for oligometastatic NSCLC. The other two articles are narrative reviews on local ablative therapy for oligometastatic NSCLC. Subsequent section on ablative radiotherapy includes four articles covering the role of SBRT in oligometastatic NSCLC including for consolidation. The section on immunotherapy includes an article on the optimization of immunotherapy in trials for oligometastatic NSCLC. The final section which is on local consolidative therapy includes six articles addressing this topic.

This comprehensive book will be an invaluable resource for clinical oncologists, radiation oncologists, medical oncologists, surgical oncologists, pulmonologists, residents/fellows, medical students, advanced practice providers, and oncology nurses.

The AME publishing team is commendable for compiling this much needed book which will provide important insights into practical management approaches and future research landscape for oligometastatic NSCLC. I trust that readers will find this book to be an indispensable companion to regular reference materials.



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