Preface XVII

The diagnosis and treatment of kidney cancer has changed rapidly in recent years. These changes have been fueled by many factors—the rise of active surveillance for small renal masses, the question of the role of cytoreductive nephrectomy for metastatic disease, insights into cancer biology, and the approval of multiple new targeted therapies, immunotherapies and combinations to name a few. For the patient with newly diagnosed kidney cancer, there have never been more options for the diagnosis and treatment of the disease. Yet, more options do not always mean consensus, and indeed, the role of the thoughtful clinician and researcher is to continue to adapt, question and refine treatment paradigms. For instance, who is the best active surveillance candidate? Is there still a role for cytoreductive nephrectomy? Does knowing germline or somatic mutation status influence treatment? What is the best first-line therapy for metastatic renal cell carcinoma? Is it different for non-clear-cell histology? Is oligometastatic disease best treated with surgery, ablative therapy or systemic therapy?

This following collection of articles, Key Leaders'Opinion on Novel Progress in Treatment of Kidney Cancer, represents the collected wisdom and insights of many of my colleagues across the disciplines of urology, medical oncology, radiation oncology and translational research. In all, more than 200 thought leaders from across the world have contributed more than 70 articles to this collection curated by the AME Publishing team. Many of these pieces thoughtfully analyze and challenge the findings of recent studies, helping to arrange new findings into the existing clinical landscape. They address the questions raised above, and provide many other insights as well. The articles have been divided into 5 sections focusing on surgical management, precision medicine, combination therapy, basic research and translational medicine.

It is my honor to provide the preface to the textbook, and I hope that the reader enjoys reading and learning from this collection as much as I have. It is an exciting time to be a kidney cancer researcher. Perhaps insights gleaned from the following pages with fuel more questions to be studied and answered.



Mark W. Ball, MD Urologic Oncology Branch, National Cancer Institute, National Institutes of Health, Bethesda, Maryland, USA