

When looking for evidence to guide cancer treatment, randomized phase 3 trials are always our first thought. Indeed, it was such studies that facilitated tremendous advances in Thoracic Oncology during the last two decades with expansion in knowledge, therapeutic progress and survival improvements consistently exceeding these for other malignancies. The increasing availability of targeted drugs and immunotherapy for both late- and early-stage tumors, routine adoption of next-generation sequencing already at initial diagnosis regardless of histology, and the upcoming generalization of screening to reduce lung cancer mortality using low-dose computer tomography comprise a unique combination that distinguishes lung cancer from all other solid tumors and makes it a model disease for the successful clinical application of novel molecular tools, imaging methods and innovative drugs.

Nonetheless, one side effect of this explosive growth has been the break-down of a hitherto homogeneous entity into a plethora of subtypes. One size does not fit all anymore, but instead disease management is increasingly tailored based on individualized tumor features in order to maximize patient benefit. While the number and size of guidelines from major societies, like the American Society of Clinical Oncology (ASCO), National Comprehensive Cancer Network (NCCN), Chinese Society of Clinical Oncology (CSCO), and European Society for Medical Oncology (ESMO) have also exponentially grown lately, these are struggling to capture new study findings and inherently unable to reflect the vast heterogeneity and numerous challenges encountered by thoracic oncologists' in daily clinical practice.

Who else can we turn to for advice? The answer is simple and was succinctly formulated by Bacchylides already 2,500 years ago: “ἕτερος ἐξ ἑτέρου σοφός, ὁ τε πάλαι τό τε νῦν”, i.e., “one gets his skill from another, now as in days of old”. For lung cancer, this inexhaustible source is the experience and wisdom of insightful peers, which constitute the priceless merit of senior colleagues in leading academic institutions, but also become freely available for everyone interested through the publication of selected vignettes with special teaching properties. One such valuable series of case reports is also included in the current book and covers the entire spectrum of recent innovations in Thoracic Oncology: for example the use of targeted drugs in special patient populations typically excluded from clinical trials, like those with lung cancer and meningeal carcinomatosis or rare oncogenic drivers; the practical implementation of emerging molecular methods without approval and reimbursement yet, like longitudinal ctDNA monitoring; the tackling of protean disease manifestations and complications, like paraneoplasia, atypical cytokine release syndrome, tyrosine kinase inhibitor (TKI)-induced rhabdomyolysis and histologic tumor transformation. How often has each one of us encountered these conditions himself? Would we be able to recognize them in time and treat them with confidence?

Let us learn from the experience of others! It is my honor and pleasure to facilitate this by presenting the current book, another result of fruitful collaboration between distinguished colleagues around the globe and the tireless AME Publishing Company team. Enjoy the interesting reading!



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