



## Surgery or Radiotherapy for Primary and Oligometastatic Lung Cancer

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### Message from the Guest Editor

In the past, the treatment decision was often easy: surgery for early lung cancer, radio-chemotherapy for locally advanced disease and a systemic treatment for metastatic disease. The progress made in different disciplines has led to a more sophisticated approach questioning the role and position of surgery or radiotherapy for early lung cancer but also in case of more advanced tumors. Surgery has evolved to a less invasive procedure with the introduction of video-assisted thoracic surgery, leading to a rapid recovery procedure and lower toxicities. In the area of radiotherapy, the technique has evolved to more precise targeting of the tumors with the introduction of intensity-modulated radiotherapy (IMRT), stereotactic ablative radiotherapy (SBRT) and adaptive radiotherapy, stereotactic body radiotherapy and on-line imaging procedures.

The type of radiotherapy and surgery are also now more often discussed for the management of early lung cancer. The population aging, facing the issue of co-morbidity; screening programs have allowed more very early lung tumors to be found. Should we still apply our old approach or should we adapt our treatments?





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## Message from the Editor-in-Chief

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