Preface

Integrating New Knowledge and Surgical Innovation into the Diagnosis and Management of Breast Cancer



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Editor

Anyone currently practicing in the field of breast oncology would certainly agree that there have been major advances in all aspects of breast cancer diagnosis and treatment over the last decade and even over the last few years. In order to offer our patients the best chance for long-term survival and the best quality of life, we must constantly evaluate the new knowledge and innovations in order to learn how best to incorporate them into our practice. In this issue of the *Surgical Oncology Clinics of North America*, we examine the changing paradigms in breast cancer diagnosis and treatment. The contributing authors have provided tremendous expertise across many areas of breast cancer diagnosis and treatment from genetic testing to management of high-risk lesions, new technologies in breast imaging, modifications in the breast cancer staging system, potential deescalation of therapies for ductal carcinoma in situ, treatment algorithms for management of lobular breast cancer, incorporating molecular subtypes into the decision making regarding local regional therapy, use of different systemic therapies in the neoadjuvant setting based on approximated subtypes, understanding how intraoperative margin assessment can reduce the need for reexcision in breast-conserving surgery, expanding the use of breast reconstruction and oncoplastic techniques, moving beyond the "whole breast radiation fits all after lumpectomy" strategy to include newer techniques in different populations, surgical strategies for management of lymphedema, and finally, understanding how genomics and big data can help us to reduce breast cancer disparities and improve outcomes locally and globally.

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This compilation of articles provides the reader with the most current evidence across the spectrum of breast oncology that can be utilized in patient management today and in the foreseeable future. Each contribution provides a critical review of the published literature with current guidelines and recommendations and identification of gaps in knowledge. The authors also describe novel technologies and ongoing clinical trials that will provide further evidence to further refine our practice in the coming years. It is critical that we continue to evaluate our diagnostic and treatment strategies in order to personalize the care that we provide and minimize the cost, inconvenience, and above all morbidity that our patients experience. I am grateful to all of the contributing authors for their excellent contributions and hope that the readers of these articles are inspired to embrace new concepts that will provide the optimal care for their patients and are challenged to consider new ideas that can further improve the prevention, detection, and treatment of our patients with breast cancer.

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