

FROM THE EDITOR'S DESK

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Dear readers of the Turkish Journal of Surgery,

Medicine has been struggling to find a solution to cancer, and cancer surgery is probably by far the field with the most surgical research. Thousands of important studies are published in the literature every year, and oncologic treatment is constantly evolving. Improvements in diagnostic and therapeutic capabilities and increasing experience have made many types of cancers no longer a hopeless disease.

In this issue, there are three important studies related to oncologic surgery, two of which are in the field of breast surgery. In their important study, Günay and colleagues report the results of intraoperative radiotherapy in early-stage breast cancer (1). Breast-conserving surgery and postoperative whole breast radiotherapy is the standard treatment for early-stage breast cancer. However, in recent years, it has been shown that intraoperative radiotherapy applied to the surgical field can reduce local recurrence. I believe everyone interested in the subject will read the experience of Günay and colleagues with great interest.

On the other hand, another important study on breast cancer in this issue is the study by Abidi and colleagues from Pakistan (2). Neoadjuvant therapies are now an important part of oncologic treatment strategies, which has led to dramatic progress in many types of cancers, and in some patients, this treatment is so effective that the primary tumor disappears completely. Abidi and colleagues investigated whether axilla dissection was necessary in breast cancer with a complete pathologic response after neoadjuvant therapy. I recommend reading this study with interesting results that may lead to a change in surgical strategy.

Oncologic surgery is indeed a field that is progressing in different directions, and approaches are updated every day. In some cancer types, surgeons are narrowing their surgical options, while in others, they are expanding them. On the one hand, breast-conserving surgery has become the standard in breast cancer, where radical surgeries were previously routinely performed. However, in another type of cancer, Nekarakanti and colleagues from India showed that surgery can prolong survival in stage 4 gallbladder cancer, where surgeries were previously mostly discouraged (3). This study examines patients undergoing surgery for stage 4 gallbladder cancer using a propensity-score matched analysis. I am inviting interested readers to read this inspiring study.

While I wish all our readers a pleasant reading for the articles in this issue of Turkish Journal of Surgery, I do hope that you have a joyful holiday time where you can find opportunities to improve yourself in every sense.

Sincerely,

Kaya SARIBEYOĞLU

Editor-in-Chief

Turkish Journal of Surgery

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