Salvage therapy

Thomas E. Keane

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One of the principle problems when dealing with prostate cancer is that 30–50 % of patients who receive curative therapy for presumed local disease confined to the prostate will develop a rising PSA indicative of recurrence. The differentiation of local prostatic recurrence from more widespread disease will determine whether the patient is a candidate for a local salvage procedure or whether he is best served by a systemic approach or combinations thereof.

I am delighted to have been invited to serve as guest editor and contributor for this edition of the World Journal of Urology. The articles contained herein represent some of the current state-of-the-art with regards to diagnosis and

treatment of patients who have failed local therapy. They discuss the options which are available to patients and their physicians as they strive to provide the optimum appropriate care. The exact role and options for imaging continues to evolve and at the present time remains a moving target in terms of which modality is superior or whether a combination of modalities is better. At the time of these reviews the full role of PET CT remains to be determined.

I hope the readers will enjoy these articles and thank all the authors for their contributions.

Sincerely,
Thomas E. Keane, MD

T. E. Keane (✉)
Brockmann Professor of Urologic Oncology,
Department of Urology, Medical University of South Carolina,
Charleston, SC, USA
e-mail: keanet@musc.edu