'Lung cancers'—a 'war' for the streets?

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Chronicalising the research on lung cancer, one cannot miss the inflection point in mid-last century, when Mary Lasker took the advocacy route through the parliament, rather than the laboratories, to bolster medical research. But ever since that pioneering effort, the focus has taken a full circle and shifted back to the research laboratories and this has become a fast and ever changing, moving target. By the time a randomized controlled trial is finished, the target has moved! New concepts in causation, pathogenesis, diagnosis and treatment, both surgical and non-surgical, have evolved. Even nomenclature and terminologies have changed. Targeted and personalized medicine and adjuvant therapy are the buzzwords as are the technical innovations in form of sleeve resection, video assisted and robotic options. But despite all the advances, these still remain one of the most lethal forms of cancers and barring the initial stages, where a cure can be achieved, in most of the situations we are still looking at palliative options. However, the future is bright as more and more knowledge about early diagnosis through breath-based techniques and tumour RNA detection in peripheral blood emerge. The most recent and contemporary evidence for novel therapies in lung cancers are very exciting and promising. That's why we thought of bringing out this featured issue on lung cancers, wherein the leaders and acclaimed masters, under the Guest Editorship of Prof. Sai Yendamuri from Roswell Park, New York, analyse and present recent data available in the field and translate the lessons learnt from trials and registries into recommendations for consumption of practicing surgeons.

Just as we look at science with awe and admiration, we need to spare a thought for the countervailing argument and the moot question—can we afford the burden of these su-

premely preventable pathologies? Will these technologies, both for early diagnosis and treatment, help the cause of the nation, as also the cause of an individual, and probably the answer to both these questions is a big 'No'. That's why, *pari passu* our attention on treatment of these disorders, a sizeable proportion of human and fiscal resources must be diverted towards education of the masses and for governmental action to reduce the prevalence of the risk factors that we know of, specially smoking and particulate and non-particulate air pollution. And that brings the wheel to a full circle. What ailed the lung cancers in the 1950s, and was answered by Mary Lasker by advocacy, seems the bugbear and impediment even today. The powerful tobacco industry, which brings huge revenues to the government coffers and funds a lot of political parties, overtly or covertly, calls shots in policy making. In fact in certain countries, tobacco mafias actually own the governments. We need to shake the government into the action, and therefore, we need to go back to the parliament. This war cannot be won on the level playing turfs of scientific laboratories, medical institutions and hospitals. It has to be won on the floor of the parliament, with a view to enforcing adequate funding and resource allocation, and in the school classrooms, with the aim of adequate sensitisation of our young generation to keep away from the menace of tobacco abuse. The war against tobacco needs to percolate down to the streets, to give it even a semblance of chance to succeed. Rules and regulations are only as good as the intent to implement them. A case in point is the total ban on public smoking in India since 2 October 2008. Yet, I dare say, majority of population is not even aware of this rule, nor probably the regulators and those people anointed for its implementation! It's the intent and the mindset that bog us down, for if we can eradicate small pox and polio, which indeed were more of a wild goose chase, banning smoking and tracking it, which is an overt target, should be just that much an easier task.

Wake up our political masters, for all you know, the next victim is you yourself or your loved near and dears.

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