PREFACE

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It gives me great pleasure in writing the preface to this “Genito-urinary Oncology”—special issue of the *Indian Journal of Surgical Oncology* (IJSO) since the journal is dedicated to update the audience with various nuances in surgical oncology vis-a-vis basic sciences, and impact of the newer technologies in both research and therapy in the last 5 years or so.

I distinctly recall a similar issue was published in 2012 which was very well received by the readers. Needless to say that the “Genito urinary oncology” is currently witnessing enormous changes not only the philosophy of the diagnosis and management in both early and advanced stage disease but also preventive aspect at secondary level if not primary. Furthermore, we are also noticing the inquiry about the role of “Genetic Mapping”.

One of the classical aims in oncological practice is to aim at “Cure.” However, it may not be feasible or possible in some

instances e.g., advanced and indolent or refractory disease. Then, the focus needs to be shifted to converting this clinical setting of “Fatal” disease into “Chronic” disease so that patient can live with it like comorbidity e.g., hyper tension and diabetes to name a few. Although this appears to be a laudable concept, for achieving this change of mindset of both physician and patient is needed. Thirdly and arguably, the most important factor is the cost and ease of treatment delivery systems for significant length of time in an aging and not so affordable population. Lastly, we are seeing the amazing progress by researchers and scientists in identifying the genetic prevalence and familial preponderance in the progeny.

To my mind, the above mentioned challenges are becoming more relevant in this era for the genito urinary oncology practitioners and allied medical fraternity. On the clinical front, there has been significant change in management ethos from solo disciplinary approach e.g., surgery or radiotherapy to a much more broad based multidisciplinary “Tumor Board” concept including family physicians and palliative care specialists, in many centers in India.

Finally, genitourinary oncology is progressing in many areas especially in technology with breakneck speed and to encompass all these issues in one edition of the journal is a Herculean task. Therefore, I would like to compliment the section editor, Dr. Raghunath, for compiling and editing this issue in a succinct manner and creating a document of the highest academic caliber. Moreover, his acumen of picking up the titles of the articles and the authors has been exemplary. Furthermore, the excellent articles written by various authors from high quality academic institutions from India and overseas have not only given a global perspective but have improved the readability.

All in all, I believe this edition will be a “feast” to the readers who are always in search of the good literature to update the knowledge and modify the practice for the benefit of patient.

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