Guest Editorial

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During the last 20 years, Uro-oncology as a subspecialty has slowly and steadily evolved.

The interest has grown significantly in the last decade owing to several factors including an increasing incidence of Urological malignancies in India, better understanding of management of these diseases, improved tools for early diagnosis and staging of the disease and availability of good non surgical therapeutic tools to treat the diseases.

Like any other subspecialty, Uro-oncology has an open horizon. Those who are trained and those who concentrate on a narrow zone with deep understanding of cancer biology, are likely to deliver optimal and high quality treatment with improved outcomes as opposed to those who are treating a wide spectrum of urological diseases.

Evolution of newer imaging techniques over the years has not only made early diagnosis of cancer possible but also helped in planning the therapy with improved survivals. Addition of every new imaging technique commencing from the Ultrasonography to PET CT Scan has significant diagnostic, staging and therapeutic implications. For instance, widespread availability of Ultrasound in the country caused a significant stage migration of Renal cell cancers in the country with more than two thirds of these cancers being diagnosed as incidentalomas with an excellent potential for curative treatment. Coupled with better understanding of cancer biology and improved surgical armamentarium, it is now also possible to cure a majority of these patients while preserving the affected kidney as well.

Similarly, better understanding of the biological behavior of Prostate cancer and widespread availability of PSA testing has facilitated earlier diagnosis of Prostate Cancer in a broad sense.

Similar minimally invasive tools like Alfa-fetoprotein, beta-HCG and maturation of concepts of Cytopathology have benefited prompt diagnosis of Testicular and Bladder Cancer.

Along with these, advent of better imaging modalities like the CT scan and the MRI have benefited Uro-Oncologists to detect, stage and offer quality therapeutics to patients. the latest such technology, the PET CT Scan promises to enhance patient management.

Surgical principles for management of Urological malignancies have now been standardized. Along with improved understanding of Surgical anatomy, of Pelvic organs in particular, Surgical armamentarium has also made significant advances. Urology has been the pioneer for minimal access surgeries and Uro Oncology is no less. More and more procedures are now being done using minimal access. With ease of availability of Laparoscopic access, many Uro oncological procedures are now done with minimal access. Robotic Surgery has transformed surgical treatment of urological malignancies. Significant ergonomic advantages along with comparable oncological outcomes now make it equivalent to open surgeries. A vast majority of prostatectomies, cystectomies and partial Nephrectomies are now done using robotic access in the west [1].

Robotics has been a little late to enter in to the therapeutic armamentarium in India. However, the last few years have seen a surge in availability of this technology. This technology is probably best suited for treating urological malignancies and most high volume centers in the country have now adopted to using robotics for treating urological malignancies.

Significant research on urological malignancies is currently under progress globally. Standardization of Radiation therapy and other minimally invasive techniques have benefited patients with urological malignancies. Development of new drugs including Chemotherapy, Targeted therapy and novel hormonal agents have changed outcomes of these malignancies significantly.

With prudent application of a combination of these diagnostic and therapeutic strategies, more and more patients with urological malignancies can now be cured of their disease or at least show significantly improved cancer specific and overall survival while maintaining excellent to good quality of life parameters for a significant period of their disease.

With changing etio-pathological and epidemiological trends, Urological malignancies are now common in occurrence in India. According to data from Globocan 2014, Prostate Cancer is now the second most common solid organ cancer in Metropolitan cities like Delhi and Bangalore [2]. In such a scenario, a dedicated scientific journal focused on niche topics of interest in urological malignancies appears absolutely necessary.

In this special edition, we try to bring you an update of articles on all such topics. We are thankful to the authors, both from within the country and from abroad, all of whom have a keen interest in research and practice of Uro-oncology who graciously agreed to contribute.

This edition hopes to address all major concerns of Uro-oncology at present and we hope will also guide all of us into better management of our patients. In the larger context, we also hope that this edition will inspire young Urologists and Surgical oncologists to develop interest in this subspeciality, which shall foster better care of patients with urological malignancies in our country.

References

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2. 2014 GlobocanData