

Preface

Liver tumor management has evolved over the last 20 years. For both primary and metastatic liver malignancies, there is a large number of alternatives that can lead to improved outcomes. Considering that all patients need a multidisciplinary approach, oncologists, physicians, surgeons, radiologists and pathologists really need to create multidisciplinary teams in which, on a case-by-case basis, optimal outcomes should be the main endpoint. The surgical approach has arisen as the cornerstone of all these advances as, at some point, full recovery requires the malignant areas to be fully cleared.

Liver metastases have traditionally been considered as the last stage of oncological disease. Patients would be referred for palliative chemotherapy and just a few would have had “miraculous” responses due to unknown circumstances. Since the beginning of the first decade of the 21st century, the scenario for the management of these patients has dramatically changed. The early series of Rene Adam, which demonstrated improved outcomes after surgical resection for colorectal liver metastases, have now become standard practice. The surgical approach has demonstrated that for some patients it turns into a feasible and safe alternative.

In the modern management of liver tumors, oncologic management has switched from the maximum tolerable strategy to the minimum effective one. In other words, less is more in the oncological global approach to our patients. Nowadays, the approach to liver malignancies, including metastatic tumors, has a new ally, which is the minimally invasive approach. Several laparoscopic and robotic series have demonstrated that a less aggressive approach than the classic open one may offer patients improved outcomes with reduced complications. Performing an optimal resection with no complications and adjusting adequate timing, type and dosage of chemotherapy, leads to improved outcomes. Multidisciplinary teams nowadays have to strike a balance between individualized biological-based chemotherapy, percutaneous strategies, surgical approaches (from minimally invasive procedures to radical extreme resections or two-stage surgeries), and even liver transplantation in very carefully selected cases.

This book offers a whole range of modern strategies for managing secondary liver malignancies. From diagnosis to non-operative strategies, with the emphasis on operative procedures, there are many possibilities for the patient in terms of treatment pathways. All of them are important and necessary. For the benefit of our patients, a deep knowledge of current evidence may lead to improved outcomes, a better quality of life, optimization of resources and a proper application of evidence-based medicine.

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