Thoracoscopic lobectomy was introduced without the support of prospective randomized trials; however, the advantages of thoracoscopic lobectomy were demonstrated through multi-institutional and propensity-matched studies, proving the quality of life advantages, safety advantages, and cost advantages, compared to thoracotomy. Prospective randomized trials would now be difficult to complete due lack of equipoise. Thoracoscopic lobectomy has emerged as the standard of care for early stage lung cancer and is utilized extensively for locally advanced lung cancer in centers of excellence. Throughout the investigation of the potential for thoracoscopic lobectomy to improve outcomes, the focus on technical aspects centered on limiting the size of the access incision, but more importantly, avoiding rib spreading with a retractor. Surgeons may have used 4 ports, or 3 ports or 2 ports, and robotic procedures may have employed with up to 5 ports, but the difference in the number of ports was never considered in assessing outcomes.

Is there a difference in outcomes based on the number of ports? Is an approach using 3 ports better than one using 4 ports? If minimally invasive approaches improve outcomes, would the most minimally invasive approach incrementally improve outcomes compared to other approaches? It is unlikely that this hypothesis will ever be tested in a prospective randomized trial, and it is possible that there are other considerations that are more important than the number of incisions, including the location of the incisions, avoidance of local trauma, and other strategies to reduce surgical stress. Yet the quest to improve outcomes by minimizing the number of incisions has been completed with the development of the uniportal thoracoscopic lobectomy.

This volume, “Uniportal Thoracoscopic Surgery” presents to most up to date data available regarding the use of uniportal approaches for early stage as well as locally advanced pulmonary malignancy. It is interesting to note that transition to a uniportal approach seems to have evolved relatively rapidly compared to the adoption of other minimally invasive approaches. The current evidence, relevant controversies, regional experience and results, and future directions are critically discussed by an international panel of experts, from Asia, Europe, and North America. This compilation is especially useful as the emphasis on minimally invasive approaches increases in the wake of lung cancer screening with low dose computed tomography, as more and more patients with early stage lung cancer will be treated and surgical approaches will be compared to non-surgical ablative approaches. Furthermore, as robotic technology evolves, a uniportal robotic platform may also emerge. It may not be possible to demonstrate that one incision is better than other minimally invasive approaches, but it is more likely that one and two port approaches will be considered preferable to ablative techniques than other multiport strategies.

The text is well-written and well-edited, providing relevant information for experienced uniportal surgeons as well as others interested in adopting the uniportal approach. This is an outstanding reference, one that will be extremely useful for the modern management of lung cancer in the era of lung cancer screening, as there will be an increased focus on optimizing the advantages of minimally invasive strategies.
I believe, without undue modesty, that I have certain qualifications to write on how to be an alien. I am an alien myself. What is more, I have been an alien all my life. Only during the first 26 years of my life was I not aware of this plain fact. I was living in my own country, a country full of aliens, and I noticed nothing particular or irregular about myself; then I came to England, and you can imagine my painful surprise. Like all great and important discoveries it was a matter of a few seconds. You probably all know from your schooldays Preface. Ian Morison, University of Manchester. Publisher: Cambridge University Press. DOI: https://doi.org/10.1017/CBO9781139683500.001. Although I have been a radio astronomer all my working life I have also greatly enjoyed observing the heavens. At the age of 12, I first observed the craters on the Moon and the moons of Jupiter with a simple telescope made from cardboard tubes and lenses given to me by my optician. As I write, I have my father’s thin, red bound, copy of Fred Hoyle’s book The Nature of the Universe on the desk beside me. It was this book that inspired me to become an astronomer. I was able to study a little astronomy as an undergraduate at Oxford University and was also in the “signals” section of the University. By continuing to use this site, you consent to the use of cookies. Got it. We value your privacy. We use cookies to offer you a better experience, personalize content, tailor advertising, provide social media features, and better understand the use of our services. To learn more or modify/prevent the use of cookies, see our Cookie Policy and Privacy Policy. Accept Cookies. top. See more of This is LIFE - Uniportal Vats documentary film on Facebook. Log In. Forgotten account? Para todos aquellos que no pudisteis acudir al estreno de THIS IS LIFE os dejo el enlace para que podáis ver la película online. El documental cuenta la historia de un paciente, mostrando esperanza para todos aquellos pacientes que padecen cáncer. Asimismo refleja la expansión por todo el mundo de una técnica nacida en una esquina de España mostrando aspectos multiculturales de cada país. Nada más, a disfrutar de los 55 minutos que dura el film. Espero que os guste. https://www.youtube.com/watch?v=tSuqikKl2kY.