

# INTERNATIONAL TRENDS IN GENERAL THORACIC SURGERY



VOLUME 4

## Esophageal Cancer

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Norman C. Delarue

Earle W. Wilkins, Jr.

John Wong



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VOLUME **4**

**NOT FOR RESALE**

## ESOPHAGEAL CANCER

**NOT FOR RESALE**

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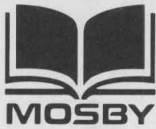
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*Use of tubular isoperistaltic gastroplasty after total or partial esophagectomy*

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*Adenocarcinoma in the columnar epithelial-lined lower esophagus of Barrett*



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*Imaging techniques*

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*Adenocarcinoma in the columnar epithelial-lined lower esophagus of Barrett*

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*Submucography in the diagnosis of esophageal tumors*

*Anastomosis using wire sutures in one layer*

*Surgical palliation in obstructing lesions—intrathoracic bypass procedures*

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*Cytologic screening for carcinoma and dysplasia of the esophagus in the People's Republic of China*

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*Combined preoperative irradiation and surgery for esophageal carcinoma*

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*Combined preoperative irradiation and surgery for esophageal carcinoma*

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*Pathologic changes affecting survival in esophageal cancer*

*Discussion: Endoesophageal intubation for palliation in obstructing esophageal carcinoma*

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*Elective surgical techniques for cervical and postcricoid lesions*

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*Discussion: Chapters 21 to 23*

*Perspective*

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*Palliation of esophageal malignancy with photodynamic therapy*

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*Discussion: Complications of the anastomosis: leak and stricture*

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*Esophagoscopy and bronchoscopy*

*Squamous cell carcinoma of the esophagus*

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*Radiologic patterns of early esophageal carcinoma*

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*Combined preoperative irradiation and surgery for esophageal carcinoma*

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*Definitive radiotherapy*

*Combined preoperative irradiation and surgery for esophageal carcinoma*

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*Surgical management of adenocarcinoma at the gastroesophageal junction*

*Combined preoperative irradiation and surgery for esophageal carcinoma*

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*Combined preoperative irradiation and surgery for esophageal carcinoma*

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*Combined preoperative irradiation and surgery for esophageal carcinoma*

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*Combined preoperative irradiation and surgery for esophageal carcinoma*

# Foreword

General thoracic surgery already has a glorious past. It has given birth to the modern discipline of cardiovascular surgery and has seen the prodigious growth of that discipline. It has developed the fundamental techniques of intrathoracic operations. The time has come to recognize the specialty of general thoracic surgery as a full-fledged discipline that is in the process of becoming progressively more distinct and unique. In many teaching centers it is already separated from both general surgical service and cardiovascular disciplines. The separate status presently held honors the surgical pioneers who made this recognition inevitable. However, continuing advances will require effective exchange of new ideas and steady reinforcement of the sense of identity that must remain the cornerstone of the edifice that has earned these past accolades. By stimulating the dialogue necessary for these goals to be attained, the current series of books is designed to help in generating an equally bright future.

Although an enormous volume of information is available in textbooks, monographs, and journals concerning matters the practicing general thoracic surgeon may find of great interest, retrieval of information is not always simple. Textbooks may not contain the most up-to-date information because of their extended publication schedules. Relevant articles may be in journals that do not primarily relate to the individual specialty and therefore are overlooked. In addition, the language problem militates significantly against the ready transfer of information from one country to another. It was in an attempt to bridge these sorts of gaps that *International Trends in General Thoracic Surgery* was designed. We believe this forum will most effectively convey new information in relation to the practical aspects of actual patient care as well as emphasize the clinical application of the material.

This series of books was developed to deliberately foster international interplay on relevant topics as expeditiously as possible. Initially, biennial publication was planned, but the enthusiastic reception given the proposal led to an expansion of the horizons and an annual publication schedule. As the concept was refined, it was agreed

that, as a general principle, an attempt should be made to cover major subjects in single-topic issues and provide a forum for discussion of other topics and diseases in multitopic volumes released in an alternating sequence. Editorial boards were chosen to ensure that attention would be drawn to new and important contributions from all geographic areas, thereby providing the broadest possible audience at the earliest possible moment. The contributors were asked to stress their personal concepts and proposals in order to engender a worthwhile exchange of opinions that would ultimately prove informative and stimulating for an international readership.

Coverage will be restricted to general thoracic surgical problems (including esophageal diseases), and no attempt will be made to include cardiovascular topics. Although emphasis will be placed on the practical aspects of patient care, an attempt will be made to review the relevant historical background whenever necessary for better understanding of complex issues. The application of new basic and clinical investigative studies will be discussed in their clinical contexts in order to maintain the emphasis on practical clinical issues.

We believe that by following the plan just outlined, this series of books will pay particular attention to the needs of the specific target groups for whom the books are intended: practicing general thoracic surgeons, general thoracic surgical trainees, referring physicians (including respirologists and gastroenterologists), and of course the reference resources housed in university, hospital, and inservice libraries. In most instances, the information presented will also be of particular interest to many other allied disciplines, notably oncologists, radiotherapists, otolaryngologists, emergency care physicians, and general internists.

North American and European editorial boards have been created to meet annually to select topics for consideration and choose knowledgeable authors who are best able to present the requested information from a broad base of clinical experience. An international advisory board has also been constituted to ensure an effective international approach to the process of topic selection