

Preface

Follow-up strategies and management of
recurrence in urologic oncology



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Guest Editor

Follow-up care is essential for all patients with cancer. Although simple in principle, the application of this concept in practice has been challenging in many cases. This difficulty arises from several causes. First, in contrast to the emphasis on techniques and outcomes, most publications do not focus on the follow-up of cancer patients. Therefore, there is a relative paucity of information upon which evidence-based decisions regarding follow-up can be made. Second, even when such evidence is available, the lack of broad consensus of such recommendations has slowed their adoption.

Fortunately, over the past 5 to 7 years, the convergence of several developments has significantly brightened the prospects of uniform follow-up for cancer patients. The genetic revolution had brought with it an enhanced appreciation of a tumor's natural history, be it treated or untreated, which provided a framework upon which follow-up strategies could be based. Second, several recent consensus recommendations from major oncology organizations have been made available to practitioners. Finally, the desire to limit health care costs has encouraged outcome studies comparing different follow-up regimens.

One of the greatest fears of individuals with cancer is that the cancer will return. Usually, symptoms of illness and any change in the body are attributed to cancer recurrence, and this often

causes great distress. Unfortunately, in some cases such findings are in fact associated with recurrence, and—similar to the challenges pertaining to follow-up—comprehensive recommendations on management of recurrence are not commonly found in the literature.

The genesis of this issue of the *Urologic Clinics of North America* is rooted in the need to address these two important issues in oncologic practice with the objective that the information provided herein will help readers with the day-to-day management of patients with urologic cancer. To accomplish this, internationally acknowledged experts in urologic oncology discuss the follow-up and management of recurrence in patients with the most common urologic cancers.

In conclusion, I would like to thank all the authors for their excellent contributions and Catherine Bewick of Elsevier for her patience, expertise, and assistance in preparing this issue.

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