Preface

The pursuit of knowledge is one of the fundamental pillars of medical professionalism. During the 8–10 years of medical education and residency training, physicians discipline themselves to acquire the knowledge needed to be able to diagnose and treat patients with different afflictions. The kind of knowledge we must pursue is described superbly by Sir William Osler, the late Regius Professor of Medicine at Oxford, in his book *Aequanimitas*:

A knowledge of the fundamental sciences upon which our art is based, … not a smattering, but a full and deep acquaintance, not with all the facts, that is impossible, but with the great principles based upon them.

With the fast paced advances in medical technology and pharmacology, these principles evolve almost constantly, and we need to keep pace. Not too many years ago, conventional surgery and radiation therapy were the only treatment modalities available to treat cancers of the head and neck region. Today, the treatment of our patients can include transoral surgery using the laser or robotics, various modalities of radiation therapy such as IMRT or the proton beam, and a variety of drugs and bioactive agents. In addition to being able to counsel patients about the relationship of their cancer with tobacco and alcohol, we now must be able to talk to them intelligently about the human papilloma virus and its relationship to cancer.

An increasingly challenging decision-making process begins as soon as the history and clinical exam are completed. The clinician is now limited to obtaining only those diagnostic tests that are supported by evidence. While having an array of treatment modalities is clearly beneficial to our patients, the clinician must have a working knowledge of the rationale, advantages and disadvantages of each of them. Only then, each patient will be prescribed the most appropriate treatment.

The purpose of this book is to provide the clinician reader with a comprehensive, concise discussion of the best evidence available on which to base clinical decisions necessary in the course of managing patients with squamous cell carcinomas of the oral cavity, pharynx and larynx. The reason this is a timely addition to the literature is twofold. First, most clinical decisions in the management of cancers of the head and neck region are based on the results of a few controlled, randomized clinical
trials (Evidence Level I); most decision making is based on the results of case-control studies (Evidence Level II), descriptive studies, reports of expert committees, or opinions of respected authorities (Evidence Level III). Second, this information is scattered throughout the literature and often intermingled with information about other topics. Therefore, there is a need for a publication in which the evidence pertinent to making decisions regarding a particular clinical problem is distilled, from the literature, and is presented in a single, concise clinical situation-driven source.

We are indebted in this endeavour to the members of the Head and Neck Team at the University of Oklahoma Health Sciences for their valuable contributions.

Oklahoma City, OK, USA

Jesus E. Medina
Nilesh R. Vasan
Cancer of the Oral Cavity, Pharynx and Larynx
Evidence-Based Decision Making
Medina, J.; Vasan, N.R. (Eds.)
2016, IX, 116 p. 22 illus., 14 illus. in color., Hardcover
ISBN: 978-3-319-18629-0