In the first of two issues that focus on the patient with head and neck cancer, we sharpen our perspective on the initial assessment and planning of care. Patients with head and neck cancer require a true multidisciplinary team approach from the beginning where appropriate imaging, medical and dental evaluation, functional and nutritional assessment, and discussion of treatment goals are critical to guiding the patient in treatment. Our aim to get it right from the start sets the stage for defining these goals of treatment and thereby locks in the best chances for achieving those goals that are most important to our patients. This first issue offers a synthesis of the best, current evidence on which to base care from initial presentation, through diagnosis and staging, and on to the execution of a plan of care. All light is shed from the vantage points of key members of a spectrum of health care providers devoted to patients with head and neck cancer.

As technological advances break barriers of past decades and open new doors to improving the outcomes of patients with head and neck cancer, the response to the call brings an urgency like never before. Indeed, all members of the diverse multidisciplinary head and neck team are currently poised to impact the care of patients with head and neck cancer like never before. And while the disease remains among the most devastating, the resolve of dedicated clinicians continues to meet these challenges like never before. Yet, as the availability of treatment options expands at an alarming rate, the greatest priorities for clinicians remain: to come to know our patients, to teach our patients by sharing our knowledge, and to join our patients in the battle of fighting their disease. Along the way, our patients come to know themselves better and find deep within them a capacity they never knew could emerge.

We hope readers of the Oral and Maxillofacial Surgery Clinics of North America will gain new insight and find practical perspectives to benefit their patients from each of the articles submitted by our contributors. The function of the head and neck multidisciplinary team and the tumor board is discussed. The most current epidemiologic data of head and neck cancer are interpreted. And the critical contribution of speech pathology, pretreatment pathways, and nutritional optimization is reviewed. The current status and optimal use of diagnostic imaging, and perioperative dental assessment, are summarized. In addition, the current focus of translational research in head and neck cancer is distilled. Finally, the role of prehabilitation and rehabilitation by physical and occupational therapy and by maxillofacial prosthetics is highlighted. While by no means comprehensive, we hope nonetheless the issue will refine clinical judgment and decision making, enhance the knowledge of surgical and oncologic principles, and inspire a deeper sense of purpose in the care of patients with head and neck cancer.
We are indebted to the vast knowledge, skills, and dedication of the many clinicians and researchers who have committed much time and effort to their contributions of this issue. We also owe an incredible debt of gratitude to our patients to whom our work serves as a monument. And last, without the tireless support of our families, none of our efforts can bear fruit.

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