Preface
The Head and Neck Cancer Patient: Neoplasm Management

Zvonimir L. Milas, MD, FACS
Thomas D. Shellenberger, DMD, MD, FACS
Editors

Having established with the first issue the importance of multidisciplinary assessment and interdisciplinary planning, we set our current aim on the execution of care and management of head and neck malignancies. As a heterogenous group of diseases, head and neck cancers pose the challenge of understanding various treatment options depending on pathology, site, and stage of disease. Furthermore, treatment alternatives with equivalent oncologic results are available for some diseases types of the same stage. Indeed, the diversity of pathologic malignancies, anatomical subsites, staging variances, and treatment options in head and neck oncology grows exponentially in complexity each year. In this second issue, we highlight the most common and impacting malignancies our readers might encounter. We explore the complexities of head and neck cancer through a focus on the site of disease (oral cavity, oropharynx, laryngeal, salivary malignancies) and from the perspective of subspecialty care (surgical, medical, and radiation oncology). This second issue offers a broad overview of the most current and best practice recommendations for the management of neoplasms. The authors succinctly highlight the current standards of care, recent changes in tumor staging, and the latest innovations in treatment that impact the delivery of care. From the first issue, we build on the foundation of getting it right from the start by the evaluation and planning of the multidisciplinary team to establish a framework for executing care with the highest chances for cure while maintaining the best quality of life for our patients.

We hope that these articles provide practical pearls of guidance and new insights to the spectrum of clinicians who care for head and neck cancer patients. In this issue, several articles summarize and analyze the most recent changes in staging of head and neck malignancies. Both radiation oncology and medical oncology perspectives provide broad and cogent synopses of current practice standards that are critical to the success of the multidisciplinary team. Both the long tradition and current evolution of head and neck surgery are chronicled in articles on salivary gland tumors, neck dissection, and oropharyngeal cancer, while providing the most current basis of treatment. The options and decision making underlying reconstructive surgery are explored with recommendations for a variety of soft tissue and osseous defects. The exciting new gains of immunotherapy and the promise of gene therapy are thoroughly and rationally elucidated. We hope to offer you, the reader, a thoughtful summary of the both the present paradigms and the prospects that lie ahead in the treatment 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.

Zvonimir L. Milas, MD, FACS
Head and Neck Cancer Center
Division of Surgical Oncology
Levine Cancer Institute, Atrium Healthcare
Suite 3300, 1021 Morehead Medical Drive
Charlotte, NC 28204, USA

Thomas D. Shellenberger, DMD, MD, FACS
Division of Surgical Oncology
Banner MD Anderson Cancer Center
Suite 450, 2946 E Banner Gateway Drive
Gilbert, AZ 85234, USA

Department of Head and Neck Surgery
The University of Texas MD Anderson Cancer Center
Houston, TX 77030, USA

E-mail addresses:
Zvonimir.Milas@carolinashealthcare.org
(T.L. Milas)
thomas.shellenberger@bannerhealth.com
(T.D. Shellenberger)