



## Comprehensive Management of Head and Neck Tumors (2-Volume Set)

*By Stanley E. Thawley MD FACS, William R. Panje MD, John G. Batsakis MD, Robert D. Lindberg MD*

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The 2nd Edition of this superb text excels at organizing a very complex subject-the management of head and neck tumors-into a comprehensive reference source. Thoroughly updated and revised, this edition contains all the essential information without repetition or superfluous material. Features in-depth coverage of tumors of the ear, the nasal cavity and paranasal sinuses, the oral cavity, the pharynx, the larynx, the salivary glands, the skin, the neck, the jaw, the thyroid and parathyroid glands, the trachea, and more!

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## **Editorial Review**

From The New England Journal of Medicine

Each year more than 50,000 people in the United States receive the diagnosis of a benign or malignant tumor of the head and neck. Head and neck cancers are usually curable when they are detected at an early stage, but all too many patients present with advanced lesions, from which they often die. Most survivors of advanced head and neck cancers have long-lasting sequelae that alter their ability to speak and swallow as well as their appearance. Even the treatment of benign head and neck neoplasms may engender considerable functional or cosmetic changes. Patients and their physicians often experience considerable anxiety during the planning of treatment for a head and neck tumor.

Benign lesions are usually adequately treated by surgery alone, as are many cancers of the head and neck. Some cancers are best controlled with radiation therapy as the primary treatment. Until recently, advanced head and neck tumors have most often been cured when treated with a combination of surgery and radiation therapy. In the past decade, increased attention has been devoted to curing head and neck tumors without surgery in an effort to limit tissue loss and the need for postoperative rehabilitation. Aggressive treatment schedules have been employed, and the use of cytotoxic chemotherapy in the initial management of head and neck cancers is under active investigation.

It is increasingly apparent that some advanced squamous-cell cancers of the head and neck may be controlled without surgery. However, it is by no means certain that the side effects of radiation therapy administered with curative intent (perhaps in concert with chemotherapy) are preferable to those of resection with modern techniques of reconstruction and postoperative radiation therapy. Progress in ablative and reconstructive surgery has dramatically reduced the functional loss and disfigurement once associated with the resection of head and neck cancers. The best way to approach tumors of the head and neck today is a subject of both research and debate.

Formidable tasks confront authors of textbooks on the treatment of head and neck tumors. Readers may come from many different disciplines and may be in various stages of training. Textbooks focused on one aspect, such as surgery, radiation therapy, or reconstruction, risk presenting too narrow an approach for a balanced treatment of debatable issues. They may be far too complex for most who consult the textbook. Broad surveys are almost invariably superficial. As the title suggests, the editors of *Comprehensive Management of Head and Neck Tumors* have confronted the problem with an approach designed to explain and explore different management possibilities with sufficient attention to detail. Generally addressing anatomical sites of disease, the sections usually include chapters covering pathology, clinical evaluation, surgical treatment and radiation, rehabilitation, and controversies surrounding the management of tumors affecting each part of the head and neck. These chapters are generally thorough, short of encyclopedic, and well referenced.

Part I, "General Considerations in the Management of Patients with Head and Neck Tumors," is nearly book-length and particularly strong. Individual chapters review topics ranging from anesthesia for head and neck surgery to rehabilitation. Interpretation of clinical research, the molecular biology of head and neck tumors, radiation therapy, chemotherapy, and prevention of head and neck cancer are discussed in detail. Curiously, no single chapter deals directly with the principles and current practice of head and neck surgery.

Once attention turns to tumors at specific sites (covered in parts II through XII), additional strengths of the book emerge. Readers will find excellent reviews of pathology, with attention paid to clinical evaluation, surgical resection, radiation therapy, and rehabilitation. Most parts end with balanced chapters devoted to controversies in management. For tumors of the pharynx and larynx, the complex issues surrounding organ preservation (the effort to extirpate cancers without surgery) are covered particularly well. The depth of coverage of management issues is usually measured. There are occasional technical points, but this is a textbook, not a surgical atlas.

There are nearly 150 contributors, most of whom are recognized as experts in their fields. With so many authors, there are some distracting variations in style. Some chapters bear a disappointing resemblance to those of the 1987 edition. Because no chapter is devoted to the principles and practice of modern head and neck surgery, it will be difficult for many readers to place an iconoclastic 120-page chapter entitled "Controversies in Multimodality Therapy for Head and Neck Cancer: Clinical and Biological Perspectives" in its proper context.

With its unique scope, *Comprehensive Management of Head and Neck Tumors* will be an important reference book for medical libraries to obtain. Most residents and practitioners of head and neck surgery or radiation oncology will benefit from reading this textbook. It is a work of inestimable value to medical oncologists who treat head and neck cancer.

*Reviewed by John A. Ridge, M.D., Ph.D.*

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