Preace

Latest approach to breast cancer treatment and reconstruction: conservative mastectomies

We were delighted to accept the invitation to edit a focused issue for *Gland Surgery* over conservative mastectomies.

Oncoplastic breast surgery is accepted worldwide as the ideal oncologic treatment for breast cancer, with the best possible aesthetic outcome. This means maximum oncologic safety, minimizing complications and recovery.

Conservative mastectomies provide removal of the entire breast gland, saving the skin, subcutaneous tissue, and NAC (if oncologically indicated). This gives the surgeon the possibility of performing an immediate 1-stage or 2-stage implant-based reconstruction or an autologous tissue reconstruction.

The distinguished group of authors, general surgeons, mastologists and plastic surgeons that have contributed to this issue have a common vision of a vertical surgeon, capable of treating the disease merging different techniques, with the concept of aesthetic importance of breast outcome.

This focused issue will be published in two parts, covering the different modalities of conservative mastectomies (NSM; SSM and SRM), anatomy, planning, complications, radiotherapy, autologous and implant-based reconstructions. Also the use of different ADM’s is analyzed.

In the last decade we have seen different innovative changes in the treatment of breast cancer, an increasing frequency of mastectomies, prophylactic treatments, oncogenes and bilateral procedures; that’s why conservative mastectomies are gaining place in the treatment of breast cancer.

We strongly believe that oncoplastic surgery must be always offered to every woman with breast cancer because it offers better quality of life for all the patients that are facing this disease.

We hope that the concepts and information provided in this focused issue of *Gland Surgery* by worldwide well-known authorities will be useful for every reader. Thanks to all of them for sharing time and knowledge.

We would like to express finally our recognition to *Gland Surgery* staff for the initiative and constant support in preparing this focused issue, and for the vision and effort in creating this journal, which is available by open access and indexed in PubMed.

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