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## Role of Surgery in NSCLC

Management of lung cancer remains a challenge; recent advances in medicine had little impact on the outcome of lung cancer. Although surgery remains the best treatment modality for early NSCLC, but are results satisfactory? While advanced NSCLC stage is more common, but can surgery play a role. The best surgical approach depends on do I have a diagnosis, Is the Staging accurate, especially T status (3&4) and with N (2&3), M (1a), Is surgical Treatment curative or improve survival, Is the patient fit for the procedure (Assessment). The best management process should consist on the following: Tumor board approach, Better diagnosis, staging, Better patient assessment, Better anesthesia, Better techniques (VATS, Instruments), Better results (Less Morbidity and Mortality) and More Aggressive (Better Adjuvant therapy). To Improve results we need Screening, Sensitive investigation tools, Better staging of tumors. The role of Lymphadenectomy, Postoperative follow up and metastasectomy is to be determined. Also Surgical techniques (Sleeve and Enblock resections) , Adjuvant therapy should be now part of the outcome based results. All that will help to definition of poor prognostic factors and achieving better results.

## Biography

Khaled Manae Al-Kattan, Dean College of Medicine, Alfaisal university and Consultant Thoracic Surgery and lung transplant at King Faisal Specialist Hospital & Research Centre. He was a co-founder of both the Saudi thoracic society and Pan Arab Chest Society. He is the Middle East regent for the European Society of Thoracic Surgery. Have extensive research and publication in his field, presented many abstracts in international symposiums. Was invited as an international speaker in many medical events. He is the Chairman of the National Lung Cancer Study Group and the national lung transplant program.

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