



# Interventional oncology: aiming globally to be the 4<sup>th</sup> pillar of cancer care

We are excited that *Chinese Clinical Oncology* has requested this special issue to focus on Interventional Oncology (IO). IO is a rapidly growing field within interventional radiology that aims to become the 4<sup>th</sup> independent pillar of oncologic care, alongside surgical, medical and radiation oncology. In recent years, the established oncologic community has understood the benefits of IO therapies in curative and palliative settings. In fact, IO therapies are now incorporated into many societal and disease treatment guidelines such as the National Comprehensive Cancer Network, American Society of Clinical Oncology and the European Society for Medical Oncology. Hopefully, with encouraging results coming from clinical trials where IO treatment strategies are at the forefront, interventional oncologists will play an even greater role in earlier patient allocation and improved outcome. Of course, many IO therapies will be used in combination with the other pillars with the goal of making oncologic patient management a truly multidisciplinary endeavor.

Technological innovation in imaging and therapeutics, successful translation of experimental concepts from bench to bedside and the scientific understanding of oncology by its providers have driven the growth of IO into a stand-alone subspecialty. To help support the practice and continued development of IO globally, the Society of Interventional Oncology was created in 2017 to advocate for our therapies and treatment guidelines in an organized fashion and to work closely with our clinical and research partners. In addition, there have been exciting new opportunities from the realm of immunotherapies, artificial intelligence, and image-guidance technologies (e.g., robotics) where IO therapies can play a major role.

This issue will highlight some of the key topics where IO therapies have had major advances including liver, lung, renal, musculoskeletal and pancreatic cancers. Furthermore, the critical roles of IO in helping referring physicians with diagnosis (e.g., biopsy), prognosis (e.g., radiomics) and palliation (e.g., pain management) of their patients will be discussed. We hope the readership of the journal will find the following articles on IO as interesting and as important to the management of their patients as we do.

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## Footnote

*Conflicts of Interest:* The authors have no conflicts of interest to declare.

*Ethical Statement:* The authors are accountable for all aspects of the work in ensuring that questions related to the accuracy or integrity of any part of the work are appropriately investigated and resolved.



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