Preface

Pulmonary medicine is arguably one of the most complex and exciting disciplines in medicine. It overlaps with critical care medicine, sleep medicine, infectious diseases, and thoracic surgery, making it one of the largest contributors to the field of medicine.

Within the field of pulmonary medicine, technological and biomedical advances continue to yield new treatments for some of the most common and deadly diseases. The subspecialty of interventional pulmonology, for example, has revolutionized the diagnosis and staging of lung cancer and now shows promise in treating asthma and emphysema. Identification of clinically significant genetic mutations in lung cancer has led to targeted chemotherapeutic agents that expand treatment options and prolong survival. In community-acquired pneumonia, increasingly complex patients, new pathogens, and drug-resistant organisms pose continuing challenges, which may be met with new patient assessment tools, including biomarkers. Advances in molecular phenotyping have shed light on the pathogenesis and treatment of hypereosinophilic syndrome. As an understanding of these heterogeneous diseases unfolds, we may anticipate further advances in our ability to impact disease course and progression.

In this issue of Medical Clinics of North America, we are fortunate to have contributors who are experts in their fields, and who have spearheaded progress in their respective subspecialties. I am profoundly grateful to them for their dedication and efforts in creating this evidence-based, state-of-the-art edition.

I sincerely hope that the comprehensive and succinct articles in this issue will enhance the knowledge of general practitioners and subspecialists alike, with the ultimate, shared goal of creating better outcomes for our patients.

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