About the editors

Sue S Yom

Sue S Yom is Associate Professor at the University of California, San Francisco (USA). She received her MD from the University of Pennsylvania (USA) and completed radiation oncology residency at the University of Texas – MD Anderson Cancer Center (USA). She sits on the National Comprehensive Cancer Network committee and chairs the American College of Radiology Appropriateness Criteria Expert Panel for head and neck. She is Senior Editor at the *International Journal of Radiation Oncology, Biology, Physics*. She is the department's Radiation Therapy Oncology Group co-Principal Investigator and is the quality-of-life Co-Chair for NRG-HN-001, a trial of Epstein–Barr virus-based, risk-adapted nasopharyngeal cancer treatment.

Joseph Wee

Joseph Wee is Senior Consultant in Radiation Oncology as well as Chairman of the Medical Board at the National Cancer Centre Singapore, and adjunct Associate Professor at the Duke–National University of Singapore Graduate Medical School (Singapore). He graduated with a MBBS from the National University of Singapore and obtained his fellowship of the Royal College of Radiologists in clinical oncology in 1991. He was elected Fellow of the Academy of Medicine of Singapore in 1995. His primary research interest is in nasopharyngeal cancer and intensity-modulated radiation therapy. In 2009, he received the Singapore National Medical Research Council, Clinician Scientist Award (Senior Investigator) to perform clinical trials in nasopharyngeal cancer.

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FOREWORD

Nasopharyngeal carcinoma: management strategies

Sue S Yom & Joseph Wee

Nasopharyngeal carcinoma is the most common head and neck malignancy in southern China and southeast Asia; it is the sixth most common reason for cancer-related death in men in these regions. Areas around the world experiencing immigration from these regions also have an elevated incidence of this endemic type of nasopharyngeal carcinoma. Nasopharyngeal carcinoma, owing to the intensity of treatments required for its eradication and the lifelong chronic side effects resulting after cure, remains a substantial cause of morbidity as well as mortality worldwide.

The past three decades have seen remarkable changes in the staging and treatment of this disease. Landmark

clinical trials established the role of concurrent chemotherapy, to be given simultaneously with radiation therapy for advanced presentations of the disease, dramatically improving the likelihood of cure. Furthermore, the advent of highly sophisticated radiation therapy technologies in the late 1990s, culminating in commercially available solutions to deliver intensity-modulated radiation therapy in the mid-2000s, have dramatically improved the prognosis of this much-feared disease. Nonetheless, a host of questions have emerged along with greater scientific understanding of this disease.

Chapter 1 describes the epidemiology and patterns of disease prevalence.

Modern radiologic anatomy, fundamental to this complex anatomic area, which is usually treated with nonsurgical means, is discussed in **Chapter 2**, while the principles of the modern staging system are set out in **Chapter 3**. Two chapters, **Chapter 4 & 5**, describe the contemporary treatment of early and locoregionally advanced nasopharyngeal carcinoma, while **Chapter 6** summarizes the emerging evidence on treatment of the nasopharyngeal carcinoma patient whose neck is considered node negative. **Chapter 7** describes post-treatment surveillance paradigms.

Chapter 8 addresses the special case of treatment of oligometastatic disease, while **Chapter 9** summarizes best practices for salvage of primary, locally recurrent disease. **Chapter 10** describes treatment principles for a patient with distant metastases. **Chapters 11 & 12** summarize findings in two areas of active research, related to the clinical employment of Epstein–Barr virus for diagnosis and therapy, as well as emerging molecular targeting approaches for this disease. **Chapter 13** describes survivorship and long-term, quality-of-life issues for these patients. Finally, **Chapter 14** addresses some of the major controversies that are current

and emerging areas of research in this disease.

Our goal in bringing together these outstanding experts in the field was to create a snapshot of the most up-to-date clinical practices and provide some intimations of the future shape of research on this disease process. We hope that this collection will be a useful guide in the clinic, a stimulus to young researchers eager to familiarize themselves with this topic and a working summary of pertinent and controversial research questions that remain for clinicians and scientists dedicated to the cure of this disease.

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