Dear Colleagues,

I would like to express my warmest feelings to those who are working at the front lines during the terrible times of the world. Nowadays, unfortunately, most of us are operating on and trying to save lives of COVID-19 patients. We are doing decortications, chest tube placements and tracheotomies, basics of thoracic surgery. On the other side, we run our regular programs and duties.

As chest surgeons of the last two decades, we have contributed a lot for the paradigm shift in thoracic surgery. VATS journal and AME group journals helped us in the distribution of the new experiences. I would like to thank to them for sharing their big investment. They provided an opportunity for those who wanted to share their experiences. AME group is an important publishing media for the chest surgeons.

In this series, we have studied on the robotic thoracic surgery, which is a close neighbor to VATS. Especially, we have focused on the robotic segmentectomy operations. Word renown surgeons participated in the development of Robotic segmentectomy operations, contributed to this series.

As you may appreciate, thoracic surgical world is changing. It is changing towards minimally invasive surgeries, towards robotic surgeries and more importantly, smaller incisions and big surgeries and better lymph node dissections.

In this series, we have discussed the role of segmentectomy operations, surgical techniques, experiences in benign diseases, mediastinal lymph node dissections as well as more recently developed imaging techniques. I would like to thank to all authors participated in this series. I know, how hard is to create an article, in a time that they could have shared with family and friend.

I would like to thank to non-author contributors, who worked hard during the development of this series. They did their best for the flow of the task. Certainly, those who funded this series credit a great appreciation.

I hope this series of VATS journal becomes a useful source for those interested in robotic segmentectomies.

Acknowledgments

I would like to thank to VATS journal, AME groups, all authors participated in the series, and non-author contributors who worked hard during the development of this series.

Funding: None.

Footnote

Provenance and Peer Review: This article was commissioned by the editorial office, Video-Assisted Thoracic Surgery for the series “Robotic Segmentectomies”. The article did not undergo external peer review.

Conflicts of Interest: The author has completed the ICMJE uniform disclosure form (available at http://dx.doi.org/10.21037/vats-2019-rsc-09). The series “Robotic Segmentectomies” was commissioned by the editorial office without any funding or sponsorship. AT served as the unpaid Guest Editor of the series and serves as an unpaid editorial board member of Video-Assisted Thoracic Surgery from Jun 2019 to May 2021. The author has no other conflicts of interest to declare.

Ethical Statement: The author is 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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Received: 12 November 2020; Accepted: 11 December 2020; Published: 15 March 2021.
doi: 10.21037/vats-2019-rcs-09

View this article at: http://dx.doi.org/10.21037/vats-2019-rcs-09

doi: 10.21037/vats-2019-rcs-09

Cite this article as: Toker A. A neighbor to VATS: robotic thoracic surgery. Video-assist Thorac Surg 2021;6:1.