

Editorial Note on Surgical Oncology

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Editorial Note

Surgical oncology is the branch of surgery applied to oncology; it focuses on the surgical management of tumors, especially cancerous tumors.

As one of several modalities in the management of cancer, the specialty of surgical oncology has evolved in steps similar to medical oncology (pharmacotherapy for cancer), which grew out of hematology, and radiation oncology, which grew out of radiology. The Ewing Society known today as the Society of Surgical Oncology was started by surgeons interested in promoting the field of oncology. Complex General Surgical Oncology was ratified by a specialty Board certification in 2011 from the American Board of Surgery.[1] The proliferation of cancer centers will continue to popularize the field, as will developments in minimally invasive techniques, palliative surgery, and neo-adjuvant treatments.

Whether surgical oncology constitutes a medical specialty per se is the topic of a heated debate. Today, some would agree that it is simply impossible for any one surgeon to be competent in the surgical management of all malignant disease.[citation needed] There are currently 19 surgical oncology fellowship training programs in the United States that have been approved by the Society of Surgical Oncology and this number is expected to grow.[2] While many general surgeons are actively involved in treating patients with malignant neoplasms, the designation of "surgical oncologist" is generally reserved for those surgeons who have completed one of the approved fellowship programs. However, this is a matter of semantics, as many surgeons who are thoroughly involved in treating cancer patients may consider themselves to be surgical oncologists.[citation needed]

Most often, surgical oncologist refers to a general surgical oncologist (a subspecialty of general surgery), but thoracic surgical oncologists, gynecologic oncologists and so forth can all be considered surgeons who specialize in treating cancer patients.

As modern chemistry developed, chemicals and various constituents were isolated from medicinal herbs. These phyto-constituents have served either as drugs that are being used widely today or as starting materials for their synthesis. Modern medicines derived from herbs are gaining attention throughout the world today. Potential of modern pharmacology that has played a supportive role in making drugs safer and more medicinal plants are playing an important role as a source of effective anticancer agents and it is significant that 60% of currently used anticancer agents are derived from natural sources including plants. Many plant-derived products have been reported to exhibit potent antitumor activity against several rodent and human cancer cell lines. Having said that, here are some things that are helpful to discuss during your first appointment: What is my diagnosis and how soon do I need to start therapy? What are my treatment options, what's involved, and how long will each treatment take? What are the benefits of the recommended treatment

Pharmacological studies have revealed that *Catharanthus roseus* contains more than 70 different types of alkaloids and chemotherapeutic agents that are effective in treating various types of cancers—breast cancer, lung cancer, uterine cancer, melanomas, and Hodgkin's and non-Hodgkin's lymphoma.