

## EDITORIAL BY THE EDITOR-IN-CHIEF

### *Dear Readers*

The current issue presents two review papers. I especially recommend the article on the diagnosis and treatment of anal cancer. The authors briefly presented the contemporary approach to this topic, encouraging cancer vigilance, as the clinical symptoms of this malignancy are not unambiguous and resemble those found in benign proctological conditions. The second review paper discusses advances in proctology in the context of well-established historical methods. Despite the unquestionable development of proctology, new surgical approaches and equipment capabilities, the principles of precise anatomical surgery, the aim to maintain the patient's continence, and to reduce perineal infections are still relevant. The issue also presents two case reports. The first report describes a patient with perinatal sphincter damage, who underwent successful reconstructive surgery. Perinatal trauma is known to be the most common cause of female incontinence. The paper was written by surgeons who underwent training in sphincter repair. They emphasise the fact that they used the skills acquired during the training courses, which translated into good treatment outcomes in the described patient. The last article discusses a treatment method used for an unhealed wound after abdominoperineal rectal amputation using displaced subcutaneous flaps. The authors used a traditional surgical technique with a good therapeutic outcome. Difficult-to-heal perineal wounds after abdominoperineal rectal amputation may have an impact on the overall anti-cancer treatment (delayed chemotherapy). The presented case also confirmed the negative impact of such factors as neoadjuvant radiotherapy, obesity and diabetes on the course of perineal wound healing after abdominoperineal rectal amputation.



*I wish you a pleasant reading!*  
*Editor-in-Chief Małgorzata Kołodziejczak*