

## Comment

The present issue of the journal is devoted solely to interventional radiology, which uses minimally invasive methods mainly in the treatment of vascular diseases and cancer. Those methods are gaining popularity in clinical practice as they offer much less invasion and stress to the patient in comparison with traditional surgical procedures, so far commonly utilized in the management of patients. The largest group among these methods are endovascular procedures: angioplasty, stenting and embolization.

The first two original papers, as well as the first case report in this journal touch a very up-to-date issue concerning the treatment of patients with aortic aneurysms using stent grafts. Their introduction has revolutionized approaches in treatment of aortic aneurysms. Pulmonary haemorrhage is often a serious clinical problem. Treatment of patients with severe hemoptysis due to pulmonary arteriovenous malformations or inflammatory lesions like aspergilloma indicate the possibility of closing the pathological vessels using embolization method.

Special attention should be paid to the papers showing the possibilities of interventional radiology (often also called interventional oncology) methods in the treatment of neoplasms. They have been used particularly for primary and metastatic liver tumors. Both chemoembolization and tumor ablation have a very important role in the treatment of these neoplasms.

The method of embolization is also used in patients with highly vascularized tumors, such as paraganglioma. The closure of the tumor-supplying vessels is very much appreciated by operators before radical surgical treatment.

The methods developed and applied in interventional radiology are marked by high effectiveness and a low complication rate. They also secure high comfort for the patients and positively influence their quality of life. The majority of cases do not require general anaesthesia, blood and blood substituted transfusions. They also carry a highly positive aspect of economy, resulting from shorter hospital stay, shorter convalescence after the procedure in comparison to surgery.

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