The Laryngoscope

LETTER TO THE EDITOR

In Reference to *The Evolution of Multidisciplinary Head and Neck Cancer Treatment*

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Dear Editor,

We read the recently published historical review entitled "The Evolution of Multidisciplinary Head and Neck Cancer Treatment" by Contrera et al. [1] The article provides a well-researched and insightful account of the evolution of head and neck cancer treatment, particularly the integration of surgery, radiotherapy, chemotherapy, and immunotherapy. The historical perspective on pioneering surgeons and their contributions is especially commendable.

However, we would like to highlight a significant omission regarding the contributions of Latin American surgeons, whose work played a fundamental role in shaping modern head and neck cancer surgery.

Dr. Justo M. Alonso from Uruguay was instrumental in the development of horizontal partial laryngectomy, a technique aimed at preserving voice and laryngeal function in patients with supraglottic tumors. His work built upon the anatomical studies of Hajek, Rouvière, and Baclesse and was preceded by early tumor resection approaches described by Wilfred Trotter in 1913 [2–4]. Alonso's innovative voice-sparing supraglottic laryngectomy published in 1947 marked a breakthrough, influencing leading surgeons of the modern era [5], including Max L. Som, Joseph H. Ogura, Jean Leroux-Robert, and Ettore Bocca [6–8]. Over time, his techniques evolved, expanding supraglottic laryngectomy to include resection of the base of the tongue, arytenoid cartilage, and piriform sinus, thus broadening its oncological and functional applicability.

Similarly, Dr. Osvaldo Suárez from Argentina pioneered the concept of Functional Neck Dissection (FND) in 1963, introducing a paradigm shift in cervical lymphadenectomy [9]. Unlike radical neck dissection, which sacrificed critical structures, Suárez's approach preserved vital anatomical elements—muscles, nerves, and vessels—while maintaining oncological efficacy. His technique was based on the concept of fascial compartments, allowing for the removal of lymphatic tissue by carefully dissecting along natural anatomical planes. This innovation led to the development of selective neck dissections, now a cornerstone of modern head and neck surgery, significantly reducing morbidity and improving postoperative quality of life [10].

Given the global impact of Alonso and Suárez's contributions, their pioneering work must be acknowledged in historical reviews such as this one. Their innovations not only transformed

surgical oncology but also paved the way for the laryngeal preservation and functionally oriented oncologic approaches that are widely used today.

We thank the authors for their effort in publishing this interesting paper, and we hope that our input could contribute to improving the knowledge about the head and neck surgery evolution findings.

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The authors have nothing to report.

Conflicts of Interest

The authors declare no conflicts of interest.

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