FROM THE EDITOR

The theme of this issue is cancer and its effects on the musculoskeletal system. Dr. Michael J. Brennan, the guest editor for this issue, has done an excellent job of recruiting well-known authors and managing the arduous process of developing the manuscripts to this final product. Thank you, Mike, for all your efforts.

Brennan opens this special issue with a study of the complications found in 50 patients with cancer. Knowing the incidence of complications, especially musculoskeletal, from a well-respected institution such as Memorial Sloan-Kettering, sets the stage for the remaining manuscripts. The first group of manuscripts focus on a variety of specific problems. These are followed by physiatric and rehabilitative approaches to the problems.

Cherny gives us the practical guide to treating cancer pain with an armamentarium of medications. "How to Use What When" could be an alternative title to this manuscript. It is very thorough, and I believe you will refer to it often.

The management of pathologic fractures is discussed in depth by Boland. Prevention is of prime importance.

Krol speaks of imaging of the brachial and lumbosacral plexus, and then Portenoy reviews back pain resulting from epidural neoplasm. Portenoy discusses various modalities and presents a very comprehensive algorithm for the management of back pain in the cancer patient. In his second contribution, Brennan gives us an overview of the physiatric approaches to cancer pain. It reviews modalities available to the physiatrist for the treatment of cancer and related disabilities. Warfel follows up with an article about assessment of the cancer patient by a physiatrist. Together these two manuscripts give a very complete picture of physiatric treatment of the cancer patient.

LaBan addresses specific assessment, treatment, and rehabilitation of the patient with metastatic disease of the spine. Lastly, McDonnell discusses the role of physical therapy in the rehabilitation of patients with metastatic disease to the bone. She answers the questions of how to help the patient reach his or her maximum level of function within the confines of the disease process. The levels of goals specific to this population are discussed.

Our desire is to instill a "practical" hope in the minds of all professionals who are challenged in many ways when working with this specific population. Subsequently, hope in our minds will inspire hope in the minds of cancer patients . . . a very worthwhile challenge.

Future issues are being planned at this time. If you have special needs or interests, please communicate them to us.

Karen S. Rucker, MD