Operative Pediatric Surgery, L. Spitz and A. G. Coran (eds)

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In this updated edition the editors compiled a collection of chapters covering contemporary practical knowledge and operative techniques for the benefit of pediatric surgical trainees and established pediatric surgeons. The contents of previous editions were supplemented to include more recently developed procedures, particularly those using a minimally invasive approach, interventional radiology, and bariatric surgery. New chapters replaced sections on cleft lip, protruding ears, and hand deformities which no longer fall under the spectrum of “pediatric surgery.” More than 100 contributors had been recruited for this effort, resulting in this heavy and large single volume comprising 101 chapters. This is supplemented with reader-friendly illustrations, radiologic images, endoscopic and intraoperative images, and decision-making diagrams.

The contributors are experts from the US (60%), UK (30%), and other countries. Moreover, some of them are the authors of original methodology, e.g., Bianchi bowel lengthening, Malone procedure, Nuss funnel chest repair, and Pena anorectoplasty.

At the end of each chapter, some suggested readings do not appear to be updated, confirming the value of the classic operative technique that has remained effective over the years. The authors’ self-citations in the suggested readings list in 30% of the chapters support their authority in the field.

The weakest points (typically) result from the difficulties in editing a multicenter work that is contributed to by so many authors. Even though the editors tried to retain a uniform format (background, history, embryology of initial

principles, and justification for the procedure, followed by preoperative investigation and the operative procedure, postoperative management, and complications), not every chapter is constructed this way. And, as is typical in such megabooks, there is some overlap of topics in several chapters. Do readers have to read repeatedly trivial phrases or clichés about the need for a carefully layered wound closure or adequate fluid replacement? Preoperative management of the neonate is basic knowledge found in classic textbooks and could have been omitted in this operative surgical textbook, making space for some neglected topics. Examples of the latter, found in the other textbook (Operative Pediatric Surgery, M. Ziegler, R. Azizkhan. McGraw-Hill), available in bookstores and on the Internet under the same title, are endocrine surgery, surgical infections, wound healing, and HIV patients, to name a few. A more aggressive use of the editors’ red pen could have decreased the incidence of back pain in pediatric surgeons who have to schlep around this superb textbook.

In today’s era of new techniques (e.g., endoscopic surgery) it is impossible to construct an operative guide covering a full range of pediatric conditions, including diagnosis and rationales for each procedure, in the single-volume textbook. Enthusiasts of pediatric laparoscopy and thoracoscopy will rather look at other printed or online sources.

The previous edition of this book has been completely sold out, having been accepted as the “classic” pediatric operative manual. The new edition, I believe, is even better and will remain an indispensable source for pediatric surgeons and trainees around the world.

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