



## About Orthopaedic awards, drains, patients safety and outcomes

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The use of drains in Orthopaedics is a large subject of debate. Historically the use of drains after any surgical procedure was a must in the twentieth century [1]. It still remains an issue that everyone addresses before any closure of a surgical wound. New perspectives are offered by dedicated young scientists that were empowered by research awards.

The evolution of the surgical techniques and the culture of the new generation of surgeons started studying new variables that could change the final result and the outcome of the surgery. Management of severe trauma, industry or traffic accidents and high-velocity injuries required special attention in the management of the injured tissues and potential secondary destructions related to hypoxia, compressions and compartment syndromes and compromised viability for some sensitive segments. New tools were developed to limit the destruction and Electrocautery and tourniquets are used on a regular basis since more than 50 years [2, 3].

Basically the drains were used for avoiding secondary hematoma and infection and therefore a plethora of techniques and devices were developed to avoid complications. Negative pressure drainage systems became available and helped in managing tissue necrosis, sufferance and protecting against infection. Microbiological monitoring is a promising way of prevention of infection in selected cases [4–6]. Some other studies show that in selected cases and protected environment surgery can be equally safe without the use of a tourniquet or of electric cautery [7, 8].

With the development of microsurgery and reconstructive techniques some unbelievable surgical performances offered a second life to injured patients that were before subject to amputations or other severe life-threatening outcomes [9].

Actually there is no defined rule for using or not a drain after surgery. It is not clear either how long should a drain be used in the body, how much negative pressure should be used in selected cases and the ultimate decision is taken by the operating team “in situ”.

Current issues of the Journal publish award papers for the SICOT world Congress after a personal involvement of the directory and board staff that encouraged ceaselessly the young scientists to present and promote their brilliant research, made sometimes in difficult technical conditions. It is our passion and pride to publish these scientific quality papers and to offer the space for expression for our young researchers arriving from different geographical areas of the world.

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