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Chest Surgery

 Springer

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Preface

Thoracic surgery is a dynamic field. Outcomes have been improving steadily, and the need for intensive care and the length of hospital stays have been decreasing. Practically all the major procedures can be performed minimally invasively, dramatically reducing pain and complications while maintaining long-term outcomes. Even open resections are often done through smaller muscle-sparing incisions. Further advances, such as robotic surgery, are being explored.

Nevertheless, the basic principles of thoracic surgery remain the same today as they have been for many decades. The anatomic characteristics, respect for the tissues of the chest, and approaches to safely perform thoracic surgical procedures have not changed. Although there have been major advances in the treatment of thoracic malignancies, the principles of surgical oncology remain the same. Therefore, a thorough understanding of these principles is still an essential foundation for good surgical care.

This atlas describes the major steps of most thoracic surgical procedures. The combination of text and drawings provides a succinct focus on the key maneuvers as well as helpful tricks and tips to avoid pitfalls, as one would obtain from working with an older surgical mentor. A textbook can provide only a static snapshot and cannot replace actual operative exposure. Nevertheless, a series of well-thought-out snapshots and narrative can tell a story vividly when combined with the imagination and experience of the surgeon who reads it. This atlas covers the entire scope of thoracic surgery.

The chapters are written by today's acclaimed experts in the field. Although there is room for variation in technique and for personal preferences, the preferred approach by an international collection of experts is worth looking at closely; this is true for both learners and experienced surgeons. After all, the mark of a top-notch surgeon is to constantly strive for better ways to carry out the craft of surgery and to be willing to critically assess his or her technique and results compared with other approaches.

Furthermore, people are inherently different, as are the disease processes by which they are affected. Adjustments must be made to accommodate unusual or unexpected circumstances. Although this atlas cannot cover these situations specifically, a firm grasp of the standard approaches and attention to the tips and tricks mentioned herein provide a good basis for a well-planned deviation when needed.

We hope those who use this atlas will find it helpful and user friendly, providing a quick yet thorough insight into thoracic surgical procedures. We also hope this atlas will contribute to the practice of safe surgery, the achievement of even better outcomes for patients, and the further development of the field of thoracic surgery.

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Heidelberg, Germany
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Hendrik C. Dienemann
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