

<<脊柱外科手术学>>

图书基本信息

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前言

The rapid growth of the specialty of spine surgery has made it extremely difficult for residents in general orthopedics and neurosurgery and for physicians practicing in other disciplines to master the knowledge required to understand this complex and constantly changing field. Physicians who provide primary care to patients and specialists in general orthopedics and neurosurgery are often asked to explain the technical details of instrumentation and implants as well as the reasons for selecting a specific spine surgery procedure. Operative Spine Surgery is the first simple reference guide that makes this type of information readily available. Our involvement with the education of residents in orthopedics, neurosurgery, and general surgery, as well as fellows in spine surgery, motivated us to undertake this major task. Discussions with our colleagues reinforced the conclusions that the effort was justified and filled a void in the plethora of ever-increasing spine literature.

Operative Spine Surgery is not an exhaustive compendium of spine surgery because multiple comprehensive reference texts already exist. But these texts were prepared with surgeons and allied specialists in the spine field in mind, whereas this book is intended for residents at the beginning of their training and for practitioners of primary specialties. To accomplish our goal, we recruited respected experts in the field of spine surgery in order to present an organized overview of our relatively new surgical specialty. The illustrations that were chosen for the book were selected because of their clarity and ease of presentation. The book editors have spent countless hours attempting to simplify the material presented and make it easier to understand. The distinguished surgeon Allen O. Whipple defined surgery as the branch of medical science which uses mechanical or operative measures for healing diseases, deformities, or injuries. There is no better definition for spine surgery. Operative Spine Surgery is devoted to this concept.

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内容概要

本书系美国匹茨堡大学院William C.Welch教授和George B.jacobs 教授及Roger P.jackson教授主编，有25位教授参加编写本书特为神经外科和骨科的住院医师，主治医师度射定做，语言显易懂，配以300余幅精美插图。

内容涵盖脊柱外科的基本概念与实践，重点强调病人的评估，手术与非手术治疗程序，手术间并发症，及长程随访、预后。

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cult. Increased reflexes, sustained clonus, and hypertonia are signs of upper motor neuron disease, and cord compression should be considered. A number of other manipulative tests are used to confirm the diagnosis of a herniated disc or of some other lesion similar to it. All of them are based on the fact that the lumbar nerve root normally moves easily through the intervertebral foramen when the sciatic or femoral nerve, which the root enters, is stretched. If that movement is impeded by a herniated disc or some other abnormality that compresses the root proximal to or at the foramen, pain along the course of the nerve occurs. One can picture a nerve as a string anchored proximally by the dural sheath extending into the epineurium and distally by its terminal attachments extending as far as the toes in the case of the sciatic nerve. All of these maneuvers are designed to cause pain. In order to reassure the patient that the examiner does not want to hurt him or her any more than is necessary, it is wise to do something that should not cause pain and may even relieve it. This will also give one an opportunity to assess the severity of the pain. This is useful when evaluating patients who have undergone repeated examinations, are very fearful of any test.

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