This book is the first available practical manual on the open abdomen. Practicing physicians, surgeons, anesthesiologists, nurses, and physiotherapists will find in it a ready source of information on all aspects of open abdomen management in temporary abdominal closure. Damage control surgery is now well established as the standard of care for severely injured patients requiring emergent laparotomy. Although it may be defined as "limited operation for control of hemorrhage and techniques for injuries to the liver, spleen, pancreas and duodenum, stomach, small bowel, colon, rectum, kidney, ureter, bladder, and abdominal veins and arteries. Preperitoneal packing is described, and instruction provided on methods of

Abdominal Access in Open and Laparoscopic Surgery

manual reviews laparoscopic techniques used in the repair of inguinal hernias and ventral incisional hernias. Among the topics explored within this updated, engaging and informative text are: • Techniques such as Extraperitoneal (TEP) and Omphaloplasty

Reconstruction: Application and Advances in Technique Minimally Invasive Ventral Hernia Repair Management of Postoperative Abdominal Bulges The Retro-Rectus Technique for Mesh Placement

common, challenging problem), and recurrent ventral abdominal hernias, to name a few. An exciting chapter on abdominal wall transplantation gives readers insight into promising new developments and what lies on the horizon in abdominal wall reconstruction. Another hot topic covered in depth in several comprehensive chapters is that of biologics in complex abdominal wall repair; these materials have revolutionized abdominal wall reconstruction. Critical chapters are included on the science behind biologics as well as specific techniques for using them. Other cutting-edge topics include: laparoscopic hernia repair and management of parastomal hernias, enterocutaneous fistulas, postoperative abdominal bulges (a

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should prove invaluable for a broad range of surgical specialties. They are assisted by a multi-disciplinary group of leading experts and pioneers in surgery and plastic surgery. The book is divided into three parts. The first part focuses on surgical technique, it also discusses basic principles, etiology of abdominal defects, organizations strategies and outcomes. A DVD with 3 operative videos complements the book. The editors have put together an imminently helpful work which evidence-based data on outcomes and numerous case examples to reinforce important concepts. Potential problems and pitfalls are thoroughly covered to help surgeons avoid potential complications. Although the main focus of this book is on
Since general surgeons first started performing laparotomies in the late 1880's, acquired hernias and abdominal wall defects have become a surgical disease of their own. Many surgeons have made it their life's work to develop surgical reconstruction methods for abdominal wall defects. The advances in critical care and peri-operative resuscitation together with knowledge of the abdominal compartment syndrome have allowed surgeons to perform complex abdominal wall reconstructions. The focus of the text is the evaluation, prevalence, surgical techniques, and outcomes of patients undergoing complex ventral hernia repairs. The use of preoperative evaluation imaging is reviewed. The multiple etiologies of hernia and abdominal wall defects are mentioned. The surgical repairs utilizing tissue repairs, both synthetic and biologic mesh are reviewed, and the component separation is discussed in detail. New hernia approaches have brought many new young surgeons to focus their skills toward improving it. As the size of the defect gets beyond 4 cm, or the patient has a significant co-morbid disease, other considerations must come into play. The component separation technique for abdominal wall reconstruction has brought many new young surgeons to focus their skills toward improving it. As the size of the defect gets beyond 4 cm, or the patient has a significant co-morbid disease, other considerations must come into play. The component separation technique for abdominal wall reconstruction has brought many new young surgeons to focus their skills toward improving it.