
Foreword

Every surgeon who operates has complications. The surgeon who says he never has a complication, does not operate. It is a matter of the law of averages. Virtually every surgical procedure that is performed has a certain incidence of complications. It can be as low as 1%, after an inguinal hernia repair, or as high as 45 or 50% after a pancreaticoduodenectomy. If enough of a surgical procedure is performed, a complication will result. Every experienced surgeon is aware of the statement “good judgment comes from experience, and experience comes from bad judgment.” As the busy surgeon gains experience, he or she will make mistakes that will add to their experience, and result in better judgment the next time that situation is encountered.

It has been shown for many complex operative procedures in recent years that larger volume leads to better outcomes. Part of the reason is that larger volume leads to more complications, which leads to more experience, which leads to better results. The high-volume surgeon gains better knowledge of the anatomy of the procedure, understands the complications that can occur, and learns to intervene earlier, all of which lead to better management.

The list of authors in this text entitled *Gastrointestinal Surgery: Management of Complex Perioperative Complications* reads like a who's who in surgery. The fact that these superb, experienced surgeons are willing to participate in this text demonstrates that these high-volume surgeons realize that complications are inevitable, and that their high volume has lead them to manage these complications earlier. In turn, the authors are able to provide many excellent suggestions on how to intervene to manage them. It is a textbook that I predict will be imminently successful, and one that every surgeon who performs complex gastrointestinal surgeries should have in their possession. I commend the authors/editors on putting together this outstanding text.

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Preface

It's fine to celebrate success but it is more important to heed the lessons of failure.

—Bill Gates

Surgery is a wonderful profession that allows us the privilege to care for patients. As surgeons we constantly strive for technical excellence in the hopes of achieving flawless results, an uneventful postoperative course, and overall exceptional healthcare outcomes. While often associated with the celebration of many “successes,” surgery also is a humbling profession punctuated by intermittent failures. Although postoperative morbidity represents one type of “failure,” complications can be viewed as an opportunity to learn, grow, and identify means to improve the treatment of future patients. While some surgeons may be inclined to avoid discussing their complications, those who choose to talk, teach, and discuss their experiences, share an enormous gift. These surgeons help the clinical community find better ways to care for patients—whether it be through prevention, detection, or treatment of difficult clinical problems.

This book aims to equip clinicians who perform complex gastrointestinal surgery with the knowledge and tools to identify, manage, and hopefully avoid some of the more difficult and challenging perioperative clinical scenarios. Topics include a broad spectrum of complex gastrointestinal surgery, including upper gastrointestinal (GI), hepatopancreaticobiliary, and colorectal procedures. The book benefits from a wide range of leading surgical experts who have contributed their clinical knowledge. These “masters of surgery” not only discuss the literature on the management of complications following complex gastrointestinal surgery, but perhaps more importantly, provide their vast personal experience on how to navigate difficult intra- and postoperative clinical situations. We hope to have captured the collective “lessons learned” from these experts in their respective fields.

Ultimately, it is our hope that the knowledge found in this book will provide all busy GI surgeons with practical and relevant information regarding how to better avoid, recognize, and treat complications. It is only in sharing our failures that we can better ensure the success of future patients.

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