

SURGICAL ANATOMY & TECHNIQUES TO THE SPINE

脊柱外科解剖 与手术技巧

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内 容 简 介

本书作者按脊柱节段和特殊类别疾病将全书分为十部分 73 章, 详细介绍了颈椎交界区和上颈椎、下颈椎、颈胸段和胸椎、胸腰段和腰椎、腰骶骨盆交界区等部位的解剖、手术入路、生物力学, 以及各节段脊柱疾病和脊柱畸形、脊柱肿瘤和血管病变、炎症性疾病、脊柱感染等的手术治疗的适应证、禁忌证、手术技术、手术技巧、并发症、术后护理等, 并且在每部分均做了精辟总结。全书突出阐述了外科解剖结构与手术技术应用和手术技巧的密切关系, 并配备了大量尸体解剖图、影像图、手术照片图加以注释说明, 系统全面, 是一部集科学性、先进性、实用性于一体的高水平学术著作, 适合各级骨科医师及脊柱外科专科医师学习使用。

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前言

脊柱外科的基本原则是以对解剖和手术技巧的全面了解为中心的。在 21 世纪，随着新型内固定器材和微创技术的发展，从颈枕融合到骶髂关节固定，脊柱外科医师有很多手术技术可供选择。由于这一领域科学技术的快速发展，许多脊柱外科医师及同道们为能紧跟其发展速度而不断地努力奋斗着。当前，手术治疗脊柱创伤和脊柱疾病的方法越来越丰富，然而在可选择的方式不断增多的同时，脊柱外科医师对于各种特殊手术入路、技术的决策程序也变得越来越难。

除了固定技术，脊柱微创技术越发普及。越来越小的切口使得脊柱外科医师只能在狭小的孔隙和有限的视野内操作。由于不能显露邻近解剖结构，这些技术给脊柱外科医师提出新的挑战。这些挑战不仅发生在减压术中，也出现在经皮内固定植入术中。

这些固定装置和技术正被应用于越来越多的患者。脊柱内固定不仅应用于创伤和退行性疾病，随着新技术的发展，亦用于肿瘤和感染的治疗。

在吸纳脊柱外科同行们的众多进展的同时，本书还囊括了枕颈融合这个热点主题，包括颈椎钢板技术和枕颈融合装置。另外，我们还回顾了颈胸段和胸腰段的融合，以及这些过渡区导致的新的复杂问题。最后，本书还讨论了长节段融合、骶髂关节固定等。

无论是面对新的内固定装置还是微创技术，脊柱外科医师必须掌握相关解剖和手术技术的基本原理。因此，我们希望通过对这些重要内容的综述，为脊柱外科医师提供一个有效的方案来应对当前医学所面临的日益复杂的难题。

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