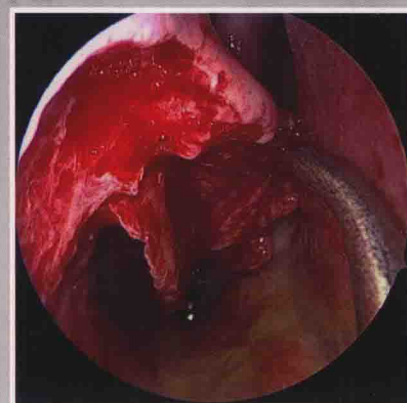
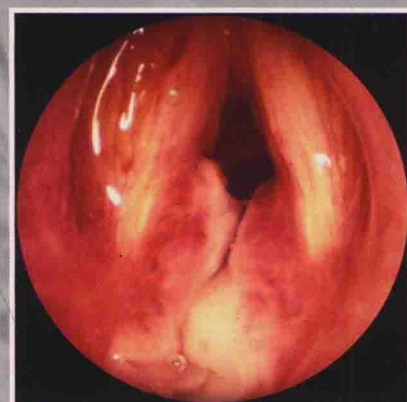
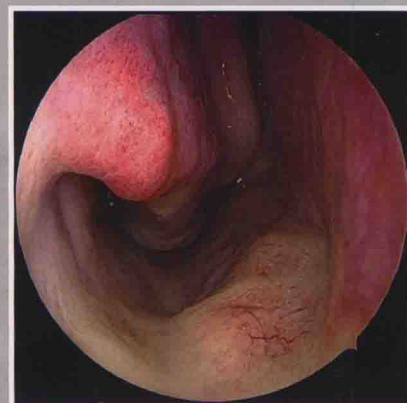


Complications in Otolaryngology- Head and Neck Surgery

耳鼻咽喉头颈手术并发症

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献 词

献给我们的家人和朋友,他们每天都在为提高我们的医疗和手术技能而努力。还要献给我们的患者,希望他们最终可以受益。

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中文版前言

我们非常荣幸能够参与翻译《耳鼻咽喉头颈手术并发症》这本书。本书详细阐述了耳鼻喉科领域的多种常见手术及其在临床过程中可能出现的各类并发症。翻译的过程也是我们临床医师学习的过程。作为一名耳鼻喉科医师,应从本书中不断汲取他人经验,在临床及科研活动中增长自己的理解领悟能力,在围术期提前思考各种可能发生的情况,并对风险因素适时规避或妥善处理。对各类并发症要能够态度积极地迅速面对。常言道:“授人以鱼不如授人以渔。”希望本书的内容能对耳鼻喉科医师的临床生涯起到指导性的作用。



序言一

在完成住院医师实习培训以及服兵役之后,我于1967年从卓越的头颈外科医师 John Conley 博士那里获得了奖学金。在我的住院医师实习生涯中,在头颈外科的手术训练机会并不多。因此,这个机会对于我意味着“补习知识”,我可以对自己所研究专业的各个领域进行新一轮的探索,并最终成为一名学术人士。

Conley 博士的实践在很多方面都很复杂。纽约纪念斯隆-凯特琳癌症中心的外科肿瘤医师均有私人诊所,而作为耳鼻喉科医师的 Conley 博士却没有。我们的门诊办公室距离进行手术的圣文森特医院有一段距离。Conley 博士遇到的一些复杂病例通常是长期被忽视的肿瘤,其中一些疾病已进行过手术及放射治疗。那时还没有化学治疗的方法,重症监护室和非延迟带蒂皮瓣技术也尚未出现。

手术医师对可能影响其手术操作成功与否的各种因素承担着最基本的职责,因而在通常情况下并发症被认为是头颈外科手术中不可避免的一部分。我们需要与裂开的伤口和瘘管做斗争,尤其是有放疗史的患者,因为他们基础情况较差。我仔细观察 Conley 博士的治疗方式并参与协助,之后在他的帮助下我获得了奖学金。在医院里,我花费很长的时间包扎伤口、防治并发症,并保证患者的其他状况如同并发症一样都可以得到治疗。

医师对患者的术后照顾负有主要的职责。为了提高患者救治的希望,实现其家人对我的期许,我对并发症有了更深入的研究。

我分析这些病例发现,总结这些经验是一项具有促进性和教学性的过程。我花费很长时间分析每个病例,研究如何使得治疗手段更加完善。随后我意识到,即使并发症的发生归咎于手术室操作的错误,但事实上这终究是一个多因素导致的问题。

很快我认识到,对并发症的预防从第一次与患者见面时就开始了。例如,虽然我们很容易识别营养不良的患者,但我们从未认为补充营养是治愈过程的重要因素。然而我意识到了它的重要性,并开始将补充营养放在治疗的首位。众所周知,吸烟具有危害性并可导致癌症,但是我们并没有对其可能影响小血管及其对治疗的负面影响有更多思考。

在仔细研究分析这一过程之后,我总结了很多新的预防并发症的方法,其中许多与手术技术有关。在不久的将来,我们的生活将因 Bakamjian 博士的胸三角皮瓣变得更好,这一发明可以将伤口立即重建。然而在以前,在关闭伤口之前患有口咽部骨瘤则会影响颈部的愈合。

研究并发症的预防花费了我整整40年的手术生涯。在跨越如此长时间的研究中不可能没有并发症的发生,然而最终我必须说,我们可以将其发生减少到最低程度。我有幸训练了150多位住院医师和无数的头颈外科同事,来帮助他们预防并发症而并非治疗并发症。

我要祝贺曼努尔·博纳尔-斯普雷克尔森教授以及编写本书的卓越的专家团队,他们围绕该领域的各个专业研究探索并发症的治愈,我由衷佩服他们的勇气。虽然本书主要的特点是诊断和治疗并发症,但我确信,更要强调的是本杰明·富兰克林的“预防为主,治疗为辅”这一箴言。

这本书对于耳鼻咽喉头颈外科是一项重大的贡献,我希望本书可以获得读者的认可。

尤金·N. 迈尔斯
(杭伟 李珊珊 译)

序言二

很荣幸我们能够被邀请来为这本有关耳鼻咽喉头颈部手术并发症的著作写序，之前有关该内容的医学专著还是在 50 年前出版的。因此，这本《耳鼻咽喉头颈手术并发症》填补了该部位(不包括面部整形美容手术)并发症检查规范的重要空白。

本书内容综合涵盖了中耳、内耳及鼻窦，内镜颅底外科手术，气道管理，喉切除术，唾液腺和甲状腺手术等。这是一本非常实用的临床参考书。

本书特点如下：

- 本书由国际上该领域权威专家共同编写，在每一个章节均分享了临床的提示、技巧、精华与经验。
- 本书内容容易学易懂，包括每种并发症的定义、后遗症及发生率，术中最常出现的问题、避免其发生的提示以及控制技巧。
- 本书基于当前科学的循证医学方法。
- 本书配有 360 余幅彩色术中照片、内镜图像以及注释，可以帮助读者更加形象地理解每一例手术存在的问题和解决方案，包括翻修手术。

随着耳鼻喉及神经外科手术团队的壮大，除鼻内镜手术之外更加复杂的手术，如前颅底手术均已开展，这本书也涉及此类手术相关并发症的内容。本书对预防和处理耳鼻咽喉头颈手术中可能出现的问题提供了解决方法。

我们相信本书必将成为耳鼻咽喉头颈外科医师必不可少的参考指南。

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前言

上一本有关全面解决耳鼻咽喉头颈外科手术并发症的书已经出版许多年了。

即使是经验丰富、技术优良的手术医师,也不能完全避免术中及术后并发症的发生。并发症并不一定是由外科医师或手术引起的,有时它们是由潜在的疾病本身引起的。例如胆脂瘤造成的水平半规管外淋巴瘘、良性肿瘤造成的颅底侵蚀或颈淋巴结转移浸润血管造成的颈动脉破裂等,都不是手术直接造成的,而是患者之前的原有疾病导致的。

不论这些并发症是外科手术直接引起的还是由疾病本身引起的,我们都应该将其展现给医师或者其他读者,而且本书描述的许多病例来自于我们自己的临床实践。此外,作为主编,我很高兴能够得到参编者的积极响应,他们立即接受了邀请并详细地撰写了每一章节。

不论并发症是由医生自身操作或者是由其他原因造成,作为一位外科医师都要从并发症中不断学习并获取经验。因此,这本书的初衷是尽可能多地展示耳鼻咽喉头颈外科手术在围术期的风险来源。此外,我们提供了一些临床“精华要点”以及对于初学者在如何提高手术技巧、加强围术期管理、保证患者安全方面的建议。当然,这些建议对于有经验的外科医师而言也是很有益的。

处理并发症将继续成为我们职业生涯的一部分,无论患者还是医师都必须面对这一问题。作为医师,我们要能够接受并发症导致的后果,从中吸取经验,学习正确的方法。

我们希望这本书能够在如何将并发症的发生控制到最低程度方面为读者提供实用的建议。当并发症发生时,临床医师将以迅速和正确的方法来应对,以避免更加严重的后果发生。

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第 1 篇

耳与侧颅底