

OPERATIVE GYNECOLOGY

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*409 Figures and
7 Color Plates*

SECOND EDITION

Preface to the Second Edition

It is always gratifying to an author to be requested to write a second edition. It signifies that the original was well received and that there will be a demand for an up-to-date work of the same type. The reception of the original work in this country and abroad far exceeded the hopes of the author and the publisher, thus vindicating the original belief of the author that there existed a great need for a book on operative gynecology. Men returning from the armed services who sought training in gynecology, gynecologists who had become rusty through years of military service in a field other than their own, general surgeons who were anxious to perfect themselves in gynecology and, finally, house officers and hospital residents were the chief users of the original edition. It is for the last-named group that the author was originally anxious to write his experience. Although many years had elapsed since he had gone through his residency training, he could recall how useful a book of this type would have been to him in his formative years. It is the author's greatest wish that the present edition will be a guide to the ever-increasing number of young men who are seeking to attain excellence in their chosen field.

Six years have passed since the original publication. Day-by-day progress in operative gynecology is slow, but it is faster than an individual realizes until he commits himself on the printed page. Then, in a remarkably short time it becomes evident that his present views are no longer exactly as he recorded them at an earlier date. When the first edition of this book was written the use of antibiotics in the treatment of pelvic infections was in its infancy. There was

scarcely enough clinical experience for any person to have crystallized his ideas. Hardly had the book been published when the views expressed on chemotherapy and antibiotics were somewhat obsolete. In 1946 the use of vaginal smears for the detection of uterine cancer was only beginning to gain a foothold, and the author avoided committing himself too positively on that controversial subject. In this edition an attempt is made to evaluate the procedure in the light of the abundant experience of the past several years. The entire subject of cervical cancer and its treatment in its various stages has been reconsidered in the past several years and this is discussed in full in the present volume. Carcinoma-in-situ has been given full consideration in a separate chapter. Progress has been made in the surgical treatment of urinary incontinence, in plastic operations for the formation of an artificial vagina and in the repair of large incisional hernias. In addition to bringing each chapter up to date, chapters have been added on the following subjects: The Use of Pessaries; The Surgery of the Double Uterus; Culdoscopy; Carcinoma of the Cervix in Situ; and Sarcoma of the Uterus.

The author is grateful for the help of Dr. C. Bernard Brack and Dr. Robert Cooley in the composition of the part of the chapter on cervical cancer dealing with irradiation. To Dr. Gerald Galvin goes the credit for assembling our data on carcinoma-in-situ. A member of our house staff, Dr. Trent Busby, who has had considerable experience as an anesthesiologist, has been very helpful in revising the chapter on anesthesia. Our chief anesthesiologist, Mrs. Phyllis Weisner, has sup-

plied us with the statistical data for this. Two residents, Dr. Robert O'Donnell and Dr. Lawrence Wharton, Jr., have helped in bringing the chapters on pre-operative and postoperative care up to date. Dr. John Angel has been helpful in collecting the data on culdoscopy. Most of the material presented on hysterosalpingography has been assembled by Dr. Georgeanna Seeger Jones. Dr. Howard Jones has been a co-worker in the field of plastic surgery on the double uterus. Without the teamwork of the above staff

members the book could not have been revised. For their help and constructive criticism the author is grateful. He is also appreciative of the skillful illustrating by his friend Mr. James Didusch. Mrs. Elinor Widmont Bodian has also contributed some of the illustrations. His two secretaries, Miss Grace Koppelman and Miss Ann Callery, have aided in typing the manuscript and searching for references. Finally, the J. B. Lippincott Company has continued to co-operate splendidly.

Baltimore, Maryland, 1952.

RICHARD W. TE LINDE

Preface to the First Edition

Gynecology has become a many-sided specialty. No longer is it simply a branch of general surgery. In order to practice this specialty in its broad sense, the gynecologist must be trained in a comprehensive field. He must be a surgeon, expert in his special field; he must be trained in the fundamentals of obstetrics; he must have the technical skill to investigate female urologic conditions; he must have an understanding of endocrinology as it applies to gynecology; he should be well grounded in gynecologic pathology; finally, he must be able to recognize and deal successfully with minor psychiatric problems which arise so commonly among gynecologic patients. With this concept of the specialty in mind this book has been written. It then becomes apparent, when one seeks training in gynecology beyond the simplest fundamentals such as are taught to undergraduates, that special works are necessary for training those who intend to practice it.

More and more this modern conception of gynecology is becoming apparent in the newer works that are appearing in the subject. Within the past decade books on gynecologic pathology, female urology, gynecologic endocrinology, medical gynecology, as well as general textbooks on gynecology, have made their appearance. These volumes have been eagerly received, but there seemed to be a void in the books available for training young men in the field of gynecologic surgery. The author has attempted to fill this void with the present volume.

In the early days of the development of gynecology, progress in surgery was rapid and brilliant. Much of this has been recorded in Kelly's "Operative Gyn-

ecology." Since these pioneer days, progress has been slow, but there has been advance in surgical technic, in the development of new operations, in the improvement in anesthesia, and in the pre- and the postoperative care of patients. Within the surgical lifetime of the author, which extends for a quarter of a century, operative mortality and morbidity have been greatly reduced as a result of improvements in these fields. Brilliant discoveries have been few, but the sum total of the minor advances add up to surprising progress.

The present volume attempts to bring the subject of operative gynecology up to date and to make recent information on that subject available in a single volume. The views expressed are those of the author and, in general, those which are put into practice on the gynecologic house service at the Johns Hopkins Hospital. On a service where many attending gynecologists work, differences of opinion are inevitable, and the author does not wish to imply that the practices advocated in this book are used uniformly by all the attending gynecologists. Indeed, the differences in point of view expressed by the visiting staff are of value to the members of the house staff, causing them to realize early in their careers that all is not forever settled in medicine.

The author is a firm believer in the system of long hospital residencies for training young men in the various surgical specialties when their minds are quick to grasp ideas and their fingers are nimble. This volume has been written particularly for this group of men. Unfortunately, there is a paucity of good gynecologic residencies in the United States in the sense that the author has

in mind. Many positions bear the name of residency but fail to give the resident sufficient operative work to justify the name. Another excellent method of development of the young gynecologist is an active assistantship to a well-trained, mature gynecologist. If the assistant is permitted to stand at the operating table opposite his chief, day after day, eventually he will acquire skill and judgment which he himself will be able to utilize as an operator. When such a preceptor system is practiced, it is important that the assistant be given some surgery of his own to do while he is still young. If a man is forced to think of himself only as a perennial assistant, this frame of mind will kill his ability to accept responsibility of his own. However, many must learn their operative gynecology under less favorable circumstances than those of the fortunate resident or assistant. This volume should be of value to those who, by self-instruction, must acquire a certain degree of operative skill. Finally, it must be admitted that more gynecology is practiced today by general surgeons in this country than by gynecologists. Although this is not ideal, circumstances make it necessary, and much of this gynecologic surgery is well done. It is hoped that many general surgeons will use this volume as a reference book.

In connection with general surgery, it is only fair to say that much has come to gynecology by way of general surgeons of the old school, who practiced general surgery in the broadest sense. Now that gynecology and/or obstetrics has become a specialty unto itself, it is well in our training of men not to swing too far from general abdominal surgery. In spite of the most careful preoperative investigation, mistakes in diagnosis will be made, and at times the gynecologist will be called upon to take care of general surgical conditions in the region of the lower

abdomen and the rectum. With this in mind, the author has included in this volume a consideration of a few of the commoner general surgical conditions occasionally encountered incidentally with gynecology or by mistaken diagnosis.

Operative Gynecology is written with the primary purpose of describing the technic of the usual and some of the rarer operative procedures. It also includes indications for and against operations as well as pre- and postoperative care of patients. Although gynecology is divided into several fields, these fields interlock so that it has been found impossible to compose a volume on gynecologic surgery to the exclusion of the other divisions of the specialty. Gynecologic pathology, for instance, is the bedrock upon which good gynecologic surgery is practiced. Without an understanding of it, surgery becomes merely a mechanical job, and errors in surgical judgment are inevitable. Hence, it has become necessary to include in this volume a minimum of gross and microscopic pathology, as it applies directly to the surgical subject under consideration. Also, some consideration is given to psychology and psychiatry in relation to gynecologic surgery. The author believes that getting the young woman on whom a hysterectomy must be done into the proper frame of mind to accept it is as important as possessing the technical skill to perform the operation.

The nature of this book has made it essential that it be well illustrated. With few exceptions, the illustrations were sketched at the operating table. The principal illustrator is James Didusch. Without the use of his talents the book could not have been produced. In addition, other excellent medical illustrators have contributed to the volume. These are the late Max Brödel, P. D. Malone, Mrs. Elinor Widmont Bodian, Miss

Ranice Birch, William Didusch and Mrs. Grace Flam. The author is grateful to all of them, and the illustrations themselves speak for the quality of their work.

The author is grateful to Dr. Houston S. Everett, who has read the manuscript and made many valuable suggestions. This volume was written during the period of World War II, when the added burden of work caused by a reduced staff would have made the writing of the book impossible except for the co-operation of the resident staff. The resident gynecologists during that period, Dr. Donald Woodruff, Dr. Edward H. Richardson, Jr., Dr. Roger B. Scott, Dr. Gerald A. Galvin, Dr. Constantino Manahan and Dr. David Cheek, have performed several of the operations portrayed and have been helpful in criticising the sketches. Dr. Charles B. Brack and Dr.

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George Farber prepared the sections relating to irradiation.

Mrs. Christine Nisbet has read the manuscript and given innumerable valuable suggestions in respect to literary style.

Much of the typing was done by Mrs. Gerald Hopkins, one of the many volunteers during the war period who have made it possible to keep the hospital open. I am grateful to my secretaries, Miss Margaret A. King, Miss Elizabeth Wood, Miss Grace F. Koppelman and Miss Bertha M. Scroggs, for their assistance in typing and looking up references. Dr. Lois Fess has also been helpful in searching the literature.

Finally, E. W. Bacon of the J. B. Lippincott Company has contributed generously from his store of practical knowledge acquired by a lifetime of experience in publishing medical works.

RICHARD W. TE LINDE

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