

CHARLES W. MAYO



Surgery of the

SMALL AND LARGE
INTESTINE

A HANDBOOK OF OPERATIVE SURGERY

Surgery of the
SMALL & LARGE INTESTINE

The HANDBOOKS of OPERATIVE SURGERY

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THE SMALL AND LARGE INTESTINE

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SMALL & LARGE
INTESTINE

by

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Dedicated

to

*My colleagues and to all others
who have contributed through the years
to surgery of these parts*

Preface

THE PURPOSE of this book is to present to those interested, concise descriptions and illustrations of the more common surgical procedures performed for lesions of the small and large intestine, including the rectum.

In conformity with the word "concise," effort has been made to avoid verbosity and repetition. The use of proper names has been omitted when possible for the reason that the method, rather than a proper name, is most important and least confusing. The literature is filled with references to articles on specific types of technic; hence, references, too, have been omitted from the present work, since they are considered outside the province of the book. For those who feel that such omissions are unforgivable slights, it is hoped that the sincerity of the objectives may justify the deletions.

If there is any danger in a book of this nature, which deals principally with surgical technic, it is only to those who fail to appreciate the fact that surgical judgment is superior to surgical technic. It is as important to know when not to operate as to know when to operate. The ideal surgical approach is not, "Can I operate on this patient?" but, "Should I?"

When in doubt—and doubt is possible—a surgeon must share responsibility. Although there are many types of surgical attack for any lesion in any location, there is only one type that is *best* for the individual patient. Survival of the patient after a given surgical procedure is not the only criterion, or perhaps not even any criterion, of good or essential surgery.

It is not the intent of the author to presume that the types of surgical technic for lesions of the small and large intestine described

in this book are the only acceptable ones. Surgery is not, and must never become, static; constant change is the essence of progress. Neither is it the intent of the author to dictate to, or to interfere with, the prerogatives of the qualified surgeon. Technics which are very new, perhaps good, but as yet unproved, have not been included except when so classified. However, when indicated, the procedures described in this volume have been employed to advantage by the author. The objectives of a surgeon are first to cure and next to alleviate but never to leave a patient worse off than he was when he sought help.

The order in which the divisions of the intestinal tract will be presented is from above downward, beginning with the third portion of the duodenum and ending with the anus. The first portion of the duodenum is considered in other volumes of this series.

With these thoughts in mind, it is the author's hope that the book will serve some useful purpose.

Deep appreciation is expressed to those who have made this book possible, particularly to Mr. Russell Drake, head of the Mayo Clinic Art Studio. Thanks are due to the fellows who were on my surgical service during the preparation of this volume. I am indebted to Drs. James Eckman and George Stilwell of the Section of Publications, Mayo Clinic, for editorial advice and assistance. Lastly, I want to voice great appreciation to my secretary, Effie Shoholm, for her invaluable work in the preparation of the manuscript.

—CHARLES W. MAYO.

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