

腹腔镜外科学

LAPAROSCOPIC SURGERY

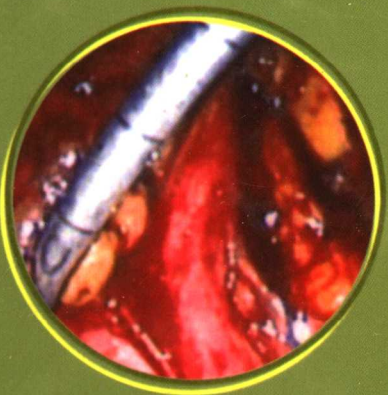



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Laparoscopic Surgery

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序

内镜外科的持续发展，使我们决心出版一本全面而权威的书来分析内镜技术在现代外科中的推动作用。随着越来越多的临床经验的积累，许多内镜外科技术已经成为我们实践的“金标准”。特别是在肾上腺外科、各种肥胖症和急腹症的诊断和治疗等方面，这些优势是显而易见的。在内分泌外科、胸外科、血管外科、妇科和泌尿外科，内镜手术同样有效，当然也和其他学科一样存在争议。然而，一些被认为是不常见的或罕见的疾病也可以用内镜技术治疗，而且有现代外科的临床经验予以支持。

正如所预期的，腹腔镜外科普及到了全世界的每个医院里。新的住院医生已经熟悉了它的操作技术，他们每天接受基础训练或在先进的腹腔镜外科手术上充当助手。大量的临床和实验课题已经证实了这种训练模式的有效性，但由于经费有限，这种训练只能在为数不多的几个教学单位进行。当然，其必将在全世界范围内开展。为了证明这些观点，我们在一些章节里描述了现今可信的腹腔镜手术方法，包括使用试验性的实验研究来进行训练和基础研究。这些不仅应用于普通外科，还有妇科、胸外科、儿科和泌尿外科，以及其他本书中所涉及的领域。

本书并不想代替现存的外科手术技术和外科教科书。这些世界著名的外科专家努力通过本书来客观地描述一种替代传统开腹手术的内镜外科技术的基本原理。它着重强调病人的潜在利益和节省医疗开支方面的关系，这些是在我们的日常工作中受到普遍关注的问题。

本书篇幅最大且最主要的部分是关于如何预防、早期诊断和处理内镜外科的并发症。自从腹腔镜胆囊切除术的手术并发症增加以来，该项技术面临着阴影。但从回顾性分析看来，这些并发症的发生主要是由于缺乏正确的训练和指导以及手术仪器和设备的缺陷所造成的。在世界某些地方，这些并发症仍然居高不下，但我们正努力避免同类错误和问题的发生。

如上所述，这些被邀请的编者都是各自领域的专家，他们中的大多数是 SAGES、EAES、ALACE、AMCÉ 和其他领域的重要成员。这些机构最新认同的结论在各个章节得到体现，其中一些结论甚至是在最近的大会上刚刚提出来的。EAES 的专家介绍介绍了腹腔镜大肠癌根治术的技术。本书的作者和编写者感谢 McGraw-Hill 的人员和来自世界各地的专家的努力和帮助。

通过对 1990 年以来的世界所有文献进行分析，我们发现微创外科很明显地给现代外科带来了巨大而有益的改变。我们相信，随着技术的发展和一些有天赋和才能的外科医务工作者的参与，内镜外科技术将会持续发展，并且逐渐扩大其应用范围。这样就达到了我们的目标，那就是给我们的病人带来更多、更好的益处，这也是我们编写《腹腔镜外科学》这本书的目的。

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前 言

2002 年是全世界范围内真正开始微创或腹腔镜外科手术的第 10 周年。

在 1992 年的第三届世界内镜外科会议上，来自世界各地的 3000 余名外科医生与过去 6 年里开创了外科新领域的大约 50 名先驱者聚集在 Bordeaux。这次会议的主题不是一个新的外科理论而是技术革新，是目前用于腹腔镜手术的一个小而轻巧的可视摄像头。这个摄像头实时地将人体内部图像转发到电视屏幕上，这样我们不打开腹腔就可以知道体内发生的事情。

由助手拿摄像头，术者就可以腾出双手，比较容易地进行外科手术的各项操作。这种手术方式取得了难以置信的普及，它的成功不仅仅来自学院医疗团体的观点，而更多地来自被手术者的满意度，这对推翻已经建立的观点和理论，建立一种新的外科治疗方式是至关重要的。

当外科技术发生跳跃式发展时，我们看到出现了保守和改革两种观点，外科学者被分成两派：腹腔镜怀疑者和腹腔镜倡导者。这种争议仍在持续，但具有很大的推动作用。它促使腹腔镜手术的支持者努力使这项技术变得更加安全和具有可控制性。同样，它使那些对这项技术持保守态度的人逐渐改变了他们的观点，因为在他们那里手术病人的数量明显下降了。

自 1992 年以来，许多组织良好的腹腔镜教育项目先后建立起来，一些令人信服的腹腔镜治疗的科学结果时有报道，而且正在继续着。然而在教育方面，由于缺乏训练有素的外科医生从事教育项目，世界上很多地方的医生没有从中获益。在科研方面，我们必须和高科技同步发展，并将他们应用于临床，这些工作是至关重要的。

经过 10 年的持续发展，腹腔镜外科已经进入了其发展道路的里程碑。本书完美地体现了该主题，它不仅向我们展现了该项技术的概况，同时对腹腔镜外科的现状进行了详细描述，包括现今腹腔镜外科的新特点，如脊柱外科、矫形外科、神经外科和未来领域，如机器人工程学、远程控制外科学，还有其他介入技术。

在各个章节的编写人员中，读者会发现既有从事腹腔镜的先驱者，又有那些每天拓展新领域的先驱者的追随者。本书对于外科医生是一个很好的工具，虽然不是尽善尽美，但却是培养低年资住院医师的主要参考资料之一。由于编写者的努力，编排有序的章节阐述了以前的观点和将来的展望，还有一些非常有效的训练方法。本书的编写得益于编者和撰稿者。他们大多来自北美和拉丁美洲，特别是墨西哥，本书证明了上述地方的腹腔镜外科组的卓越和活力。

腹腔镜外科发展的一个简单的原因就是它把病人放在第一位，以最少的副作用更好地治愈疾病。

应该向新一代普外科医生传播一个新的观点：微创思想。它将病人的舒适放在了首位。那些掌握腹腔镜技术的外科医生已经证明这种手术效果比开腹手术的效果更好或差不多。本书将帮助大家更好地理解这种全新的微创外科技术。

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Courtesy of K. Storz, Germany

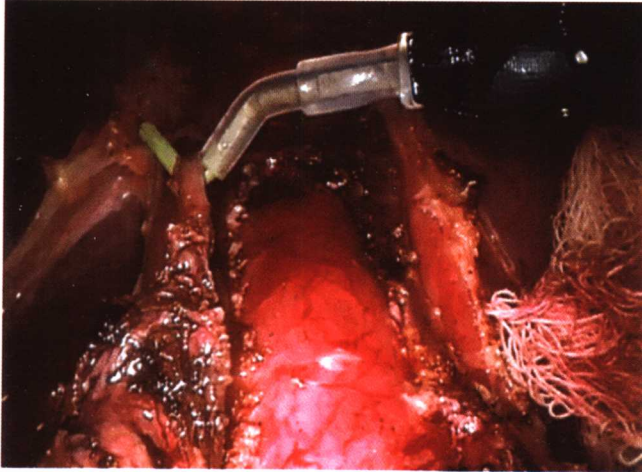


图 17-6 用 Da Vinci 机器人系统进行食管肌层切开

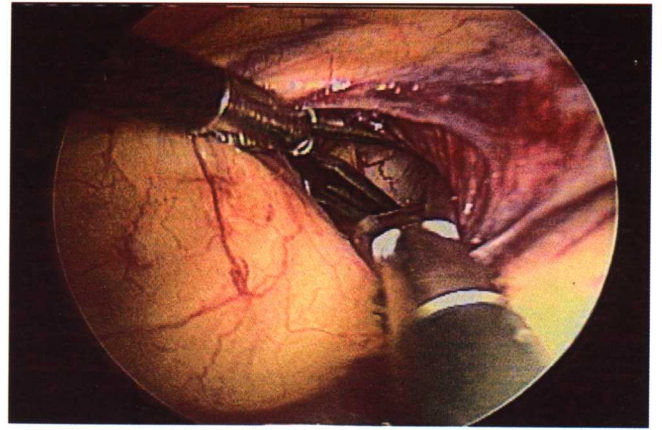


图 26-4 分离迷走神经前支的胃支与胃壁的间隙

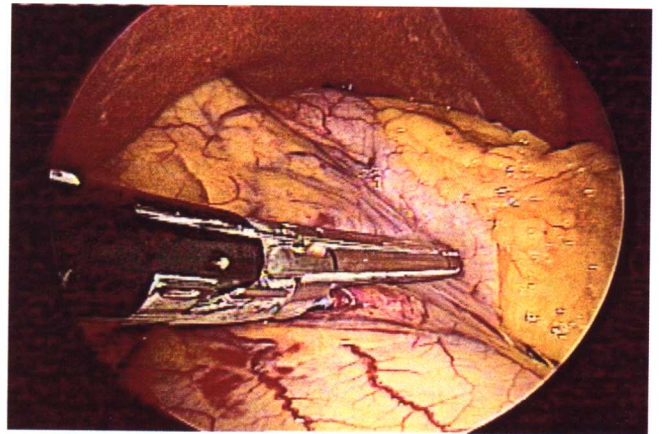


图 26-5A 钉合胃壁以形成胃贮袋

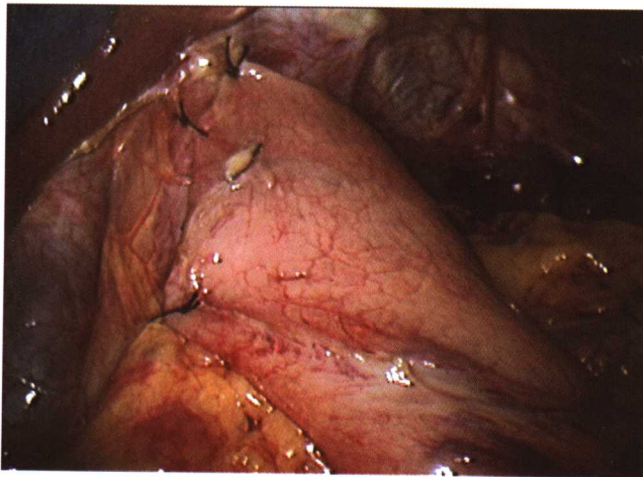


图 17-7 Dor 前半胃底折叠术

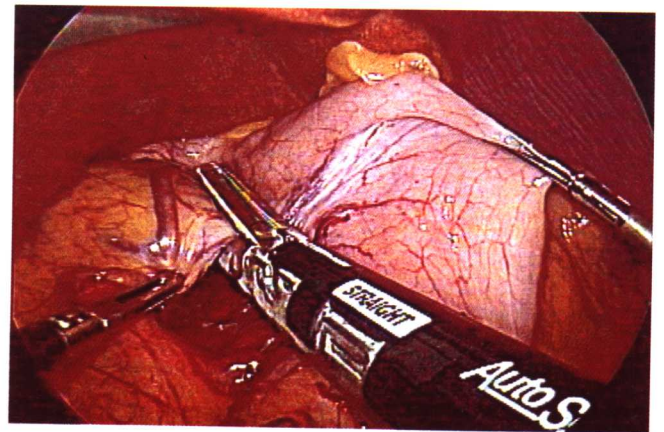


图 26-5B 进一步钉合胃贮袋成形