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THE SHOULDER

肩关节外科学

(第4版/下卷)

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图书在版编目(CIP)数据

肩关节外科学(上下卷)/(美)洛克伍德(Rockwood, C.A.)等原著者:徐卫东等主译.-4版.北京:人民军医出版社,2012.11

ISBN 978-7-5091-6195-1

I.①肩… Ⅱ.①洛…②徐… Ⅲ.①肩关节-外科学 IV.①R684

中国版本图书馆CIP数据核字(2012)第253704号

策划编辑: 黄建松 姚 磊 孟凡辉 文字编辑: 李春德 李 欢 责任审读: 陈晓平

出版发行: 人民军医出版社

经销:新华书店

通信地址: 北京市100036信箱188分箱 邮编: 100036.

质量反馈电话: (010)51927290;(010)51927283

邮购电话: (010)51927252

策划编辑电话: (010)51927300-8057

网址: www.pmmp.com.cn

印、装: 三河市春园印刷有限公司

开本: 889mm×1194mm 1/16

印张: 86 字数: 2478千字

版、印次: 2012年11月 第4版 第1次印刷

印数: 0001-1600

定价(上、下卷): 1198.00元

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内容提要

本书由近百位国际著名肩关节外科专家编写。该书系统介绍了肩的发育、盂肱关节的解剖、肩关节大体解剖学及先天性异常和解剖变异,肩关节疾患的临床和影像学评估,肩关节的生物力学,肩关节的疗效评估,肩部手术麻醉等,重点介绍了各种肩关节疾患的外科治疗详细方案和外科操作技巧,涵盖了肩关节外科最新信息、最新知识、最新手术技术,并附有大量参考资料和文献,客观公允地评价了肩关节疾患各种外科治疗方案的优缺点,介绍了笔者临床体会和宝贵经验。本书内容全面系统,观点科学严谨,治疗方案具体实用,是一本集先进性、指导性、实用性于一体的高级参考书,适合广大肩关节外科医师及相关医务人员阅读使用。



肩关节是人体功能和解剖最为复杂的关节。近些年,在众多学者的研究和大量临床实践下,肩关节外科的相关理论和治疗技术日新月异。肩关节外科已成为目前骨科临床和运动医学外科最受关注的一个学科。由Rockwood等大师编著的第4版《The Shoulder》出版,无疑是我们肩关节外科医师们必应嚼食的一场"盛宴"。自19世纪80年代第1版《The Shoulder》问世至今,该书以其知识内容的系统丰富、编者的严谨笃实及其更新的与时俱进,为肩关节外科学发展和人才培养作出了不朽的贡献,并逐渐成为一部国际公认的肩关节外科领域的最专业教材,被奉为"圣经"之作。

第4版《The Shoulder》秉承了一贯的编著风格,在深入浅出论述肩关节解剖、功能、生物力学、影像学诊断及各种疾病治疗技术的同时,吸纳了当前最新理论和临床研究成果,进行了大量更新。例如:肱骨近端骨折和肩胛骨骨折处理的新概念、盂肱关节不稳及处理的新进展、肩关节镜手术学、肩袖手术失败的评估及处理、运动员肩关节疾病、肩关节周围肿瘤及相关疾病等。这些内容的充实,为这部经典著作焕发新春,也给我们肩关节外科医师们及时学习和掌握当前的最新理论和治疗技术提供了最为翔实的资料。

非常荣幸,在中华医学会运动医疗分会李国平、敖英芳、陈世益、刘玉杰等领导的大力支持下,在中华医学会运动医疗分会上肢学组全体同志的努力下,我能与国内二十余家医院三十多位活跃在肩关节外科临床一线的专家,在第一时间学习本书,并用一年多的时间完成了这部250多万字巨著的翻译工作。在本书中文版即将付梓之际,我借此向给予大力支持与无私帮助的领导及同仁们表示诚挚的谢意和崇高的敬意!如果不是大家志同道合、坚定不移、热爱这一工作,很难想象大家在繁重的临床工作之外,能够完成这一巨著的翻译。欣喜之余,我也恳请各位同仁和读者朋友们给予理解和帮助。由于工程浩大,参与人员众多,以及本人水平有限,文中如出现谬误或欠妥之处,还望大家批评指正。

衷心希望我们所做的微薄工作,能为中国肩关节外科事业起到一点促进作用,授益于临床一线的医师们,造福于广大的肩关节病患者。

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Fractures of the Proximal

Humerus; Disorders of the Sternoclavicular

Joint; Glenohumeral Instability; Rotator

Cuff; Glenohumeral Arthritis and Its

Management

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第4版原著序

非常荣幸能有此机会为《肩关节外科学》(第4版)这本重点介绍肩关节疾病及损伤治疗的教科书作序。

在19世纪80年代,由于肩关节疾病及损伤知识和信息的急剧增加,迫切需要对此做系统收集和整理,于是第1版《肩关节外科学》问世了。从那时起,人们对于肩关节的认识不断改变,治疗技术层出不穷,迅速发展。那时,对肱骨近端骨折的分类已有了深入的理解,而且固定方法也有了改进;撞击综合征已被发现。同时,肩袖撕裂修复手术的成功率也有很大的提高,肩关节不稳定的生物力学概念也已形成,人工髋关节和膝关节手术开始应用,所以有人考虑相关技术是否可以应用于肩关节,并付诸实践。关节镜的应用也不再局限于对膝关节进行评估和治疗,开始应用于肩关节并逐渐成熟。这些大量的新知识需要进行归纳、整理,本版《肩关节外科学》的出版达到了预期目的。该书各个章节中所涉及的肩关节内容,均来自于授课资料、学术成果及相关教科书。

希望此书的编者们能够再接再厉,不断更新,给大家带来更多的新信息、新知识。例如,肩部的外科解剖和生物力学知识,新的临床评估和影像学信息,肩部骨折治疗的新方法,应用关节镜评估和治疗肩关节问题的新信息,肩袖撕裂的相关问题及进展,我们在对患者进行评估和治疗时需要的新的思想理念等。

我们必须感谢这些杰出的教育工作者:是他们组织了大量学术交流活动,相互间建立了深刻的 友谊和联系,是他们全身心投入到肩关节的临床和基础研究中,是他们积极地开展新的课题研究来 验证新观点,改进和创造新的手术材料、器械和设备。读完此书,读者不仅可以解决临床中碰到 的各种问题,更关键的是对于肩关节疾病及损伤的治疗原理和方法等方面,均会有清晰的认识和更 高层次的把握。如果读者把《肩关节外科学》当作从事肩关节疾病及损伤诊疗工作的一部重要参考 书,乃至作为圣经来研读,都是应该和值得的。

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第4版原著前言

亲爱的读者:

谢谢您跟我们一起共同关注肩关节。在人体,除了肩关节外没有任何一个部位有如此复杂的解剖、巨大的功能需求,而且涉及多种临床疾患,如先天性缺陷、骨折、关节炎、不稳定、僵硬、肌 腱撕裂和肿瘤。

CAR和FAM在肩关节疾病治疗方面合作了25年。虽然San Antonio和Seattle这两所学校没有合作过,但是在很多方面我们的观点很早就一致。无论是肩袖撕裂、不稳定,还是肩关节炎等。甚至我们一致认为,不是所有肩袖撕裂都能修复,也不应该尝试去修复所有肩袖撕裂! 当然,有些也不尽相同,但对于这一版书中一些作者的新观点、差异较大的观点,甚至是完全不同的观点,我们仍表示了极大的尊重,不管这些作者来自美国的哪个地区,还是国外。我们非常感谢第4版《肩关节外科学》一些新章节的作者作出的巨大贡献。

在美国和其他国家,健康和保健的花费是最昂贵的开支。现在,我们不仅必须考虑诊断工具是 否精确和治疗方法是否有效,而且还要考虑它们的使用是否适当,以及对每一位病人应用的价值。 如果我们能够免除那些对治疗无用的检查测试,避免应用不划算的治疗器械,我们将成为卫生健康 资源最好的管理员。事实上,这可能是我们最大的挑战。

当我们的知识来自于期刊中相对较少而又没有代表性的案例时,我们怎样才能在实践中把工作做到最好?我们相信还需要很大努力才能实现Codman的理想: "每一家医院对病人进行治疗时有共同的结论,足够的时间来判定这个治疗是否成功,接着进行调查'如果不成功,为什么不成功?'以便于以后避免类似的错误"。

本书的主编Michael A.Wirth和Steven B.Lippitt及两位新的副主编Edward V.Fehringer和 John W.Sperling都是著名的肩关节外科医师,在我们试图提高此书的质量而又无从下手时,得到了他们巨大的帮助。

希望大家在学习肩关节知识时锐意创新,批判地对待听到的和看到的知识,在采用新的肩部疾 病评估和治疗方法时持保守态度。我们希望这本书在医师考虑对患者采取什么治疗方案最有利时提 供一些帮助。我们希望您对这本书的喜爱如同我们创作它的初衷一样。

把最美好的祝愿送给每一位从事肩关节外科的医师!

Charles A. Rockwood, Jr, MD
Michael A. Wirth, MD
Frederick A. Matsen, III, MD
Steven B. Lippitt, MD

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