Arthritis is the leading cause of disability in the adult US population. Twenty-one percent of adults report physician-diagnosed arthritis, a prevalence projected to increase markedly for the foreseeable future. As conditions for which surgery is often required, the arthritides, in their various presentations, will continue to fuel the need for surgical intervention for years to come. Further societal demographics underscore the importance of these projections, especially for elderly patient populations, since the elderly are not only the fastest growing segment of western society, but arthritis as a disease category reaches its peak in older populations. Even today, this is the demographic group that already accounts for the majority of such procedures, particularly total joint arthroplasty.

Medical management in the setting of surgery is a relatively new consultative arena, one spurred on in contemporary times by the aging patient population, a rising prevalence of complex chronic disease, and an ever-expanding surgical armamentarium. Nowhere has the confluence of these forces been more evident than in orthopedic surgery, a highly innovative field, the advances of which continue to enhance the functional capacity and quality of life of patients across the entire span of life.

Although a number of comprehensive textbooks pertaining to perioperative medicine are currently available, none focus exclusively and comprehensively on the patient undergoing orthopedic surgery. The format of this book was developed with several purposes in mind. A primary goal was the development of the first published comprehensive overview of the challenges presented by the orthopedic surgical environment; as such, the book covers most of the relevant domains of orthopedic surgery. A second ambition was to provide an overview of the innovative and sometimes unique approaches to anesthesia in this patient population. A third objective was a presentation of a general approach to the preoperative evaluation of patients, while the fourth and final aim was to offer an up-to-date review of the disease-specific challenges to the care of patients undergoing surgery, maintaining a particular focus on orthopedic procedures whenever possible. In order to achieve these goals, the book is divided into five primary sections: (1) Preoperative Considerations; (2) Anesthesiologic Management; (3) Medical Management in Specific Clinical Settings; (4) Specific Perioperative Problems in Orthopedic Surgery; (5) Role of Allied Services. The book closes with a chapter providing a number of cases and clinical vignettes illustrating the challenges of caring for patients in the orthopedic surgical setting.

A word about us and our institution also seems appropriate. Hospital for Special Surgery is one of the world’s premier hospitals devoted to orthopedic and rheumatologic care, its functions are supported by 140 inpatient beds, over 60 recovery room/acute carebeds, and 35 in- and outpatient operating rooms. A full complement of orthopedic subspecialties is backed by the Department of Medicine, Rheumatology, and Perioperative Medicine as well as a 57 member Department of Anesthesiology. Fourteen thousand inpatient and a comparable number of outpatient orthopedic procedures generate over 13,000 preoperative consultations annually. Given this extensive experience, we felt the time was right to contribute in a comprehensive and multidisciplinary way our collective approach to perioperative orthopedic care. The editors, whose tenures at HSS date back 30 years, feel well positioned to lead this effort.
Much has changed from the days during which most of our surgery was conducted on an inpatient basis, all patients admitted (and usually evaluated medically for the first time) the day before their procedure; 5–7 days of postoperative care and rehabilitation generally followed, even after routine total joint arthroplasty. Indeed, the modernization of care, driven though it was by outside forces and unwelcome in its time, has forced greater efficiencies in care, promoted (not stifled) innovation, and lowered cost, while minimizing patient exposure to the hospital environment—all outcomes for the better.

In closing, the editors want to express their gratitude first to the contributors to this book. As a “ground-up” endeavor, we appreciate your efforts, diligence, and particularly your patience. Thanks is also extended to Liz Corra, our development editor at Springer for her encouragement and endurance. Finally, a word to our readers, ultimately the judges of this effort: we hope you find this reference useful in your daily striving to provide the best possible care for patients. While we take full responsibility for its content, we recognize there may be shortcomings and even important omissions in this first edition. Thus, at a time when knowledge and innovation are advancing medical care on a daily basis, we invite commentary and constructive criticism from the broader perioperative and surgical community. Future editions can only benefit from such collective wisdom.

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