Preface

When Jim Ecklund approached me to co-edit a text about the care of the polytrauma patient with CNS injury I knew it would be worth the effort. History has taught us that tremendous medical advances are made during periods of armed conflict. The severity of wounds, the volume of patients, the complexity of medical and surgical decision-making, and the teamwork inspired by wartime care bring professionals from many different disciplines together with an urgency and a sense of purpose that is sometimes difficult to achieve otherwise. Those lessons, and many others learned every day by our civilian friends and colleagues across many disciplines of medicine and surgery, are presented here. This multidisciplinary approach is not uncommon, but we have taken it a step further and asked our authors to specifically focus their chapters on the boundaries, the conflicts, and the solutions they have found when specialties intersect while caring for a critically ill neurotrauma patient.

Our goal is to leverage lessons learned by our military and civilian authors, apply them to the broader practice of complex trauma care, and help make them stick. The “stickiness” is the difficult part, because after each crisis we often fall back on our pre-crisis behaviors, and nowhere is this tendency more apparent than in military medicine. Nations throughout history have ramped up their medical systems during war, learned great lessons (from the ambulance systems of Napoleon to the flying ICUs of the current conflicts), and then disbanded their military healthcare system between wars—only to see the need to rebuild and relearn prior lessons for the inevitable next conflict.

We hope this book will add to the great works both completed and in preparation and inform the next generation of medical professionals who are entrusted with the lives of the world’s most severely injured—military or civilian.

Jim and I have been privileged throughout our careers, to this very day, to work with some of the finest medical professionals around the world. Our patients have taken us on journeys requiring us to stretch the limits of our own skills, the teams we have led, and the organizations in which we have cared for those patients. In doing so it became ever more clear to us as we grew in our practice of neurosurgery that reaching across traditional boundaries and collaborating in a multidisciplinary fashion is not only good for patients but ultimately good for us. Our professional and personal lives
have been enriched immeasurably by our colleagues, so many of whom are contributors to this work.

We want to acknowledge the work of all the authors represented here. Their willingness to take time out of their busy schedules to put pen to paper speaks to their commitment to insure the lessons of multidisciplinary, collaborative work to care for our sickest patients are not lost in the day-to-day routine of our healthcare lives.

In addition, there is no doubt in my mind or Jim’s that this book would not have been possible without the untiring efforts of our colleague Michele Theiss. Keeping two busy neurosurgeons on task is challenging enough, but to consistently do so with professionalism, grace, style, and eloquence takes a very special person with impressive leadership talents. Michele encompasses all these things and more. Jim and I, the authors, and all readers will be forever in her debt.

Last but certainly not least I have to acknowledge my co-editor. Jim and I have known each other as cadets at West Point, served together as neurosurgery residents, attending neurosurgeons and Chiefs of Neurosurgery at Walter Reed, and shared stories of combat surgery. Jim has always been an extraordinary leader, and he has been able to immensely elevate the level of every program he has led through his vision, hard work, and dogged determination. When Jim Ecklund says he’s going to get something done, bank on it. Most of all I have to thank Jim for keeping me around all these years and allowing me to serve beside a leader of such character, integrity, and dedication to his patients and his profession.

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