

Preface

A surgical textbook devoted only to clavicle injuries would have been unthinkable in the twentieth century. Clavicle injuries were common but had long been understood to be predominately treated nonsurgically. The results of these injuries were uniformly reported to be good and any debate centered on the type and duration of immobilization.

The close of the twentieth century saw the rise of evidence-based medicine and a reinvestigation of the previously published reports of clavicle injuries. Investigators compared their results to historical controls and found considerable divergence in fracture healing and other variables. Current investigators have drawn attention to the considerable heterogeneity of earlier reports, which often included pediatric populations which demonstrate better results in fracture healing than adult populations.

Evidence-based medicine included the emergence of outcome measurements across the orthopedic spectrum. While these measures are imperfect, they attempt to infuse a component into our treatment process which was missing in medical treatment. These measures continue to push the boundaries of orthopedic treatment and introduce new concepts. Emerging concepts include clavicle malunion with resultant scapular dyskinesis—an oxymoron from historical reports which viewed all clavicle fractures with union as success.

This textbook emerges from the ashes of twentieth-century expert opinion and relies on biomechanics, anatomy, radiography, evidence-based medicine, and outcome studies to reach the conclusions relayed in each chapter. The state of the art of treatment of clavicle injuries is not static by any means and considerable debate exists regarding the diagnosis and proper treatment of these injuries. This debate is a healthy sign of the orthopedic community, where diversity of opinions based on science leads to a relentless improvement in patient outcomes.

Although the textbook is centered on science and data, it would be foolhardy to ignore the power of a story in human existence and medical treatment. Oral stories have dominated human existence and are as powerful as the mastery of fire in the development of civilizations. The importance of a story has been strongly interwoven in medicine by the use of case conferences, reviews, and didactic sessions. Although data is a strong lure, often the story of a medical treatment is the hook

which engages changes in behavior and treatment. In keeping with this oral tradition, we have sought to augment the scientific principles of each chapter and include selective cases at the end of each chapter.

In the lineage of human history, failures are considered orphans. This textbook has reached success and by some definition springs from many fathers. Springer publishing of course is the original source of this creation and has been wonderful in my first stint as a book editor. I am indebted to Kristopher Spring at Springer for the confidence in placing me at the helm of the publication. Patrick Carr has accompanied the text from its recruitment phase through production with guidance that insured equanimity among the authors and insured delivery of a quality work on time—a difficult task which Patrick handled adeptly.

The editing world brims with horror stories of multiauthor texts and the difficulties in gaining an acceptance and producing a book chapter. Happily, this was far from the truth in this text. I asked many of my professional friends to produce a chapter and leaned heavily on them for suggestions of other sources. The authors of each chapter are recognized experts in their field and have each produced elegant works which required only the lightest touch of editing. The quality of work produced may have spoiled me forever as an editor going forward.

The seminal event in my professional life was my time as a fellow for Dr. Charles A. Rockwood, Jr. Dr. Rockwood provided an environment which produced innovation and education. Although incredibly prescient about a number of topics, he extolled the value of investigation and the scientific process. Being identified as a Rockwood Fellow is still one of my proudest academic achievements and biggest influences. The corollary of training with Dr. Rockwood has been the blessing to have many mentors and friends from the fellowship in my life, including Dr. Carl Basamania, Dr. Wayne Burkhead, Dr. Federico Grassi, Dr. Michael Simoni, Dr. Gerald Williams, and Dr. Michael Wirth. My life is much richer due to their teaching and friendship.

Family of course is the other ingredient in this creation. I am fortunate to have both of my parents (Don and June Groh) extremely vigorous and involved in their 80s. They forged a spirit of aspiration in lockstep with the value of hard work which has served well throughout my life. My academic interests I attribute to my uncle and aunt (Nancy and John E. Groh, PhD) who helped guide my trajectory and have always shown interest in my endeavors.

All of this would ring hollow if Susan, my wife of 25 years, had not burst into my life. She has always had the utmost confidence in me, even when what I was doing seemed counterintuitive. She endured a fellowship in hand surgery after I had completed a shoulder fellowship and provided a pathway to achieve an MBA via the Kenan-Flagler School of Business at the University of North Carolina, Chapel Hill. She is the glue which holds our family together and produced the three most precious gifts—our children Griffin, Parker, and Bailey. It is a joy to watch my children achieve and flourish—I am extremely proud of each of them. My wife and children have been my anchor through my life and have freely given their time, love, and understanding. I love, honor, and cherish each of them and acknowledge how truly fortunate I am.



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