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SURGERY IN PEDIATRICS

Foreword

EVERYONE whose child must be operated upon is indebted to those surgeons who have shown the way. Timothy Holmes and Samuel W. Kelley, whose texts appeared in 1869 and 1909 respectively, were the early leaders in the field. The more modern pioneers are Sir Lancelot Barrington Ward, William E. Ladd, Willis J. Potts, and Robert E. Gross. These men and their many brilliant students have demonstrated that operations of tremendous complexity can be performed successfully regardless of the small size of the patient.

Great medical advances in anesthesia, antibiotic therapy, and in the understanding of fluid and electrolyte administration have kept pace with the development of surgical technics. They have made the application of such technics possible. Progressive sharpening of the diagnostic abilities of the physician, particularly evident in the field of congenital heart disease, has also led to greater success and lessened mortality in the surgery of childhood.

In the early part of this century, Samuel W. Kelley, Orthopedist and Pediatricist of St. Luke's Hospital in Cleveland, could encompass in his time all that was known of the surgery of every region of the body of the child. The days of such great general surgeons are past. Knowledge in the surgical specialties has become far too extensive to be mastered by the individual. The surgeon who would limit his activities to an age group must find his niche in a large pediatric hospital, and in general his field is increasingly confined to surgical disease of the abdomen. From his entrenchment, however, he can and does challenge us all to match his progress and his skill.

Throughout the nation the burden of surgery upon children must be carried by others than those who would specialize in that age group. In institutions such as ours, for example, about 11 percent of all major surgical procedures, exclusive of tonsillectomy and adenoidectomy, involves patients less than 14 years of age.

It is our conviction that the skilled specialist surgeon has already met the challenge that has been offered. Aware of the disorders in his field which are peculiar to small children, adapting his technics to their small bodies, and aided by his medical colleagues, he has made astonishing progress in the last decade. The field of cardiac surgery serves as an example. The papers presented in this issue of the *Cleveland Clinic Quarterly* illustrate some of the problems met by specialists who operate upon children.

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