

Severe contractures management. Advanced procedures

*This book is dedicated to the memory
of our friends and heavily involved cooperants, during many workshops in many
countries, working side by side under limited resources:
the great Sattish Battat and Marlene Long.*



Edited by: Alberto Musolas

Collaborators: Pierre Quinodoz, Einar Eriksen and Lionel Dumont.

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PROLOGUE

The Lancet Commission on Global Surgery has reported that five billion people worldwide do not have access to safe and affordable surgery and anesthesia. This need for surgery is greatest in the poorest regions of the world - Western, Eastern, and Central sub-Saharan Africa, and South and Southeast Asia. The burden is extraordinary; lack of access to surgical care affects entire families and communities, not only individuals.

Furthermore, with three billion people in developing countries relying on open flames and cookstoves for daily meals, burns are one of the leading causes of death and disfigurement. Burn contractures result from this lack of timely surgical treatment. When a patient suffers a burn and cannot receive timely treatment with debridement and skin grafting, his or her body will eventually heal, but by contracting joints until the wound closes.

Severe Contractures Management Volume III is an outstanding new textbook edited by Dr. Alberto Musolas that directly addresses the overwhelming need for burn contracture reconstruction. Dr. Musolas and his colleagues, Drs. Pierre Quinodoz, Einar Eriksen, Satish Batta and Lionel Dumont represent the braintrust of Second Chance, a highly respected volunteer organization that teaches reconstructive surgery in at least twelve different countries in Africa.

I have had a chance to read through this comprehensive textbook that covers burn contracture reconstruction from head to toe. It begins with the principles of operative techniques, outlines the unique Morphological African Skin Contractures Classification and Algorithm (MASCCA), and then describes optimal surgical treatment for contractures in each specific body region. The textbook ends with important details about post-operative pain management.

I look forward to having this wonderful book with me when I embark on my own reconstructive work abroad in developing nations. This represents the collective experience of reconstructive surgery experts working on the most challenging cases, in the most limited settings. It is our collective hope and dream that we can teach surgeons around the world these proven techniques so that deserving patients may be liberated from their contractures, and returned to full and rich lives.

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EDITORIAL

Where does a book begin? (How does such a book happen?)

When Dr Alberto Musolas asked me to write a preface for the 2nd edition of our book, I was pleased and honoured. We have collaborated for many years around the globe and have come to realise the importance of reconstructive surgery in giving disabled people a second chance in life. Standardisation of the technique and clear explanations are important for reconstructive surgeons dealing with malformations.

This book will help advanced plastic surgeons to perform a better operation and will help young plastic surgeons and general surgeons to decide when and how to operate. This book is the result of years of experience. Many surgeons use it in their daily practice and the classification on different types of contractures is already widely accepted around the world.

Continuing change, the hallmark of all surgical practice dictates the need for a book such as this. The readers will find a useful resource with the hope it contributes to the education of plastic surgeons. This book has been written so that it is comprehensive enough to satisfy the needs of surgeons who are more advanced in reconstructive surgery but also presents useful information for surgeons who are still "entry-level". To assist the reader, many lectures and videos are available on the 2nd-Chance website www.2nd-chance.org

Together with the 2nd-Chance team, we work not only as surgeons but also as promoters of the need of political guidelines in the field of surgery. Recent data shows that after mass violence in war countries, the problem of reconstruction only refers to housing reconstruction, not human reconstruction. If you "google" post-war-reconstruction, you will not find any mention of people reconstruction but only housing reconstruction, which is very sad. To help, we need to reconstruct people, not only their houses: large-scale-funding and political efforts should be channelled in that direction. The solution needs to be local and this book is focused on teaching surgeons working in non-developing areas with advanced pathologies. Please allow me to conclude with a quote from Thomas Sankara, a Burkina Faso ex-president who was assassinated in 1987 but still continues to inspire us 30 years later: "Help should kill help".

Pierre Quinodoz MD

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