In This Issue

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Research

Trends in Emergent Hernia Repair in the United States

Abdominal wall hernia is one of the most common conditions encountered by general surgeons. Rising rates of abdominal wall hernia repair have been described; however, population-based evidence concerning incidence rates of emergent hernia repair is unknown. Beadles et al performed a retrospective analysis using National Center for Health Statistics data from 2001 to 2010 and examined trends in rates of emergent abdominal hernia repair. They found that there is an increasing trend in overall emergent hernia repair in the United States, particularly incisional hernia repair among older men.

SPIRICAL COAST SURGICAL ASSOCIATION

Technical and Nontechnical Skills in Surgery Residents

During emergencies, surgeons work in interprofessional teams and may need to perform emergency procedures; thus, resident training is needed. Forty-three surgical residents were evaluated during simulated clinical scenarios with an interdisciplinary team. Residents reported improved procedural confidence after training. Interprofessional simulation sessions resulted in improved communication, leadership, teamwork, and procedural ability scores. Nicksa et al conclude that interprofessional simulation provides a valuable means of educating surgical residents and evaluating their skills in real-life clinical scenarios.

Invited Commentary

Spirometry and Pulmonary Function After Laparotomy

Although the use of incentive spirometry is the standard of care in developing countries, its utility is equivocal. Tyson et al performed a prospective randomized clinical trial for 150 patients, assessing the changes in pulmonary function in patients with and without the use of incentive spirometry following exploratory laparotomy at Kamuzu Central Hospital, Lilongwe, Malawi. They found no statistically significant difference in pulmonary function between the control and intervention arms.

Continuing Medical Education

Trend Analysis of Primary Tumor Resection for Colorectal Cancer

In the modern era of systemic chemotherapy, the role of primary tumor resection in the management of patients with stage IV colorectal cancer is not known. Hu and colleagues examined primary tumor resection rates among 64 157 patients with stage IV colorectal cancer and demonstrated decreasing rates of primary tumor resection over time. Despite the observed decreasing rates, patient survival has improved, which may in part be attributed to advances in systemic chemotherapy.

Survival Benefit of Solid-Organ Transplant

The field of solid-organ transplantation has grown from an experimental endeavor to an accepted therapy with tremendous survival benefit. Using the Social Security Administration Death Master File and the United Network for Organ Sharing database, Rana et al compared the survival rate of 579 506 patients who were placed on the waiting list but did not undergo a transplant with the survival rate of 533 329 recipients who underwent a transplant. In a quarter century of solid-organ transplants, 2.3 million life-years, or 2.15 million life-years after adjusting with propensity score matching, have been saved to date.

LETTERS

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