Craniocerebral Trauma

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Drug Dosage
The author and publisher have exerted every effort to ensure that drug selection and dosage set forth in this text are in accord with current recommendations and practice at the time of publication. However, in view of ongoing research, changes in government regulations, and the constant flow of information relating to drug therapy and drug reactions, the reader is urged to check the package insert for each drug for any change in indications and dosage and for added warnings and precautions. This is particularly important when the recommended agent is a new and/or infrequently employed drug.

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Preface

This volume 10 is the swan song, i.e., the final number, of Progress in Neurological Surgery under the aegis of its present editorial group. Our fundamental goal has been to present a series of analyses of all of the valuable neurosurgical work all over the world. Each chapter's essayists have been asked to appraise critically all that has been published or is known in a tightly circumscribed field so that the busy clinician may turn to that chapter for such information and advice. The essayists have been asked not only to report all, but to assess the value of all that has been reported, from their vantage point as special experts in the area in question. This difficult task has of course been achieved with variable success, but it is a goal toward which we hope our successors will continue to strive.

The three senior editors have all retired from their posts as service or department chiefs and wish to express in this final preface particular thanks to their three junior colleagues in the editorial division who have done more...
of the work and received less of the kudos than their seniors. Professor Pietro Paoletti has served with us from the very beginning. Among many other services in connection with these volumes he played the key part in bringing together in the first place the three senior editors to try to achieve the objectives of this new series. Dr. Charles Poletti has carried the burden, aided by staff he has recruited, of placing into more acceptable and lucid English the invited manuscripts submitted for volumes 5-10. This role was played for volumes 1-4 by Dr. R. Lewis Wright and his wife Sarah. While their task has often been onerous when the text was prepared by one whose native tongue was not English, it has not been negligible in a number of instances when the author's original language was in fact English. The editors thank the numerous non-American, non-English contributors for their extra labors in converting their thoughts into English, recognizing that this may have been more of a chore for them than the job at the editorial end of polishing the text they submitted.

The subject of this our last volume, craniocerebral trauma, is one which needs frequent review. The revelations of intracranial contents displayed in such startling and unequivocal fashion by computed tomographic scans are nowhere more fruitful for detailed diagnosis and rational treatment than in patients with trauma. In a striking technical advance the problem of differentiating between swelling due to edema and that due to focal hemorrhage has been solved by a riskless noninvasive procedure. It remains for us to maximize the value to the patients of this marvellous new information described in the chapter by van Dongen and Braakman of Rotterdam. One needs to use it and the less readily obtainable data with respect to cerebral blood flow and metabolism presented to us by our colleagues from the New York University and the University of Pennsylvania to deal with various facets of the problem. These have been laid before us in their nonsurgical aspects by Reulen and Schürmann of West Germany and in various of their surgical aspects by Vigouroux and Guillermain and by the Glasgow school of Jennett. Finally, the subjects of posttraumatic epilepsy and of rehabilitation are handled by three of our colleagues from Bordeaux. The editors are happy that such a distinguished group has consented to undertake this tutorial assignment.

This series of Progress in Neurological Surgery will be continued by a new Editorial Board comprised of active, prominent neurosurgeons under the chairmanship of Dr. Alex M. Landolt. It may be relevant as our final gesture to warn our successors that one of the editorial roles, that of selecting the authors to write for such volumes as these, is not an easy one. We have no ready solution for the happily infrequent situation in which authors
submit an inadequate treatment of their topic - the bane of all who would
take responsibility for treatises with many invited authors. We have not been
able to muster the fortitude to refuse to publish such submissions.
It is probably preferable to have an excess of proposed chapters for a
volume than just enough. Then, if one or two authors fail to come through with
their texts by the appointed deadline date, the book can simply go to press
without them. The editors must reckon with the fact that the very person who
is the best qualified to write the chapter in question because of his critical
analysis of a long personal experience is apt to have become even busier
clinically because of worldwide recognition of the fact. Moreover, the more
persuasive his contributions are in neurosurgery the more likely are his university
and/or clinical colleagues to be seeking his services elsewhere. Major

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administrative responsibilities both in his own center and in the national
and international organizations he serves may have wiped out his relatively
free time. Examples of individuals who have contributed to Progress in Neurological
Surgery despite massive diverse responsibilities are to be found in
every volume. The writing of chapters such as these in essentially a labor of
love.
We close with our fervent thanks to all those authors in volumes 1-10
who have engaged in such labor, and we wish our successor editors and authors
good luck throughout many future volumes.

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