New 'Surgical Innovation' as a Revolution

Moshe Schein

Cornell University Medical College, New York, N.Y., and Department of Surgery,
Bronx-Lebanon Hospital, Bronx, N.Y., USA

What promoted this brief commentary is the great enthusiasm with which surgeons welcomed the use of circular stapler in the management of hemorrhoids. Clearly, many thousands of patients were subjected to this procedure, worldwide, before the emergence of solid scientific evidence to document its short- and long-term advantages, efficacy, and safety. Let me thus reflect on surgeons' attitude to any new 'surgical innovation'.

Surgeons – as all human beings – express a few limited patterns of attitude. One could compare a surgical 'innovation' to a political revolution (e.g., the French, the October in Russia, or that of the National Socialists in Germany during the 1930s). To simplify matters, let me identify six main patterns of attitude. The 'revolution' in our case will be the 'anal stapling procedure' (ASP), also known as PPH (procedure for prolapsed hemorrhoids) [1, 2].

(1) The True Revolutionists

Those are the few true innovators, they developed the new method, they introduced it, if it wins – their fame and wealth is secure; if they lose – then they are back to obscurity. Thus, they are ready even to die for an idea which may shine a new light on the anus – for a thousand years.

(2) The True Intellectuals

Those are the very few who join the revolution only after assessing its value from inside out. They are ready to join it, but once they see that its direction is false – they would quit – ready to pay for the consequences. Those are the surgeons who would go and learn ASP from the true revolutionists and then submit the innovation to the scientific scrutiny of level I studies – always ready to abort and confess that the revolution was wrong. This is clearly a tiny minority. By the way: those are also the people who use the term *anal cushions* instead of *hemorrhoids*.

(3) The Profiteers

Those are the sort of people who would join any revolution as long as they can have a personal gain – be it a better position, academic advantage, power, money, and prestige. They would join any revolution irrespective of its nature – they will use the ASP – correctly or incorrectly – on anyone who has an anus – in order to gain more patients, more money, and simply to have fun. They do not represent a minority.

(4) The Reactionaries

They tend to oppose and resist any revolution. They are happy with the old order – whatever it is. They do not want to learn anything new. They were doing conventional pile surgery – their patients are ‘happy’, right? – So why change? No, they are not active counterrevolutionists, but, simply, they do not care and are passive. They are not members of the resistance, nor they are collaborators. They make a significant portion of the surgical community.

(5) The Counterrevolutionists

Those are the surgeons who perceive from the beginning that the revolution is false or wrong. They fight against it. Those are the ones who die on the guillotine, in the ‘gulags’, or in the ‘camps’. Occasionally they are wrong, but usually they fight for the right cause – sensing that the new procedure is dangerous, and gimmicky, and has to be aborted.

(6) The Masses

This is the vast majority. They would sit tight on the fence, waiting to see how things develop and who will win. They care about bringing bread to their families and cure to their patients. They would support the revolution only after they see it has succeeded. Unfortunately, they may join it at some stage even if they know it is wrong and evil. They are forced to do so; they do not want to die together with the counterrevolutionists for they are not heroes. ‘If everybody does ASP – I have to do it as well.’

Being humans, surgeons’ attitude to surgical ‘innovations’ follows certain fix patterns. Are we not predictable? To which group do you belong?

References

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- 2 Mehigan BJ, Monson JR, Hartley JE: Stapling procedure for haemorrhoids versus Milligan-Morgan haemorrhoidectomy: randomised controlled trial. *Lancet* 2000;355:782–785.