

EDITORIAL I

Journal of Surgical Technique and Case Report: Maiden Edition

This maiden edition of Journal of Surgical Technique and Case Report carries with it a lot of fascinating articles: surgical techniques, case reports, case series and lots more! These have been carefully presented by surgical experts in their various fields of surgical endeavour, and well packaged by the editorial board. Professor Shehu and colleagues described their experience with foraminotomy, a posterior surgical approach in the clinical treatment of radicular pain in patients with tuberculous spondylitis. They emphasized that surgery is reserved for cases of failed medical treatment, spinal cord/spinal root compression, or spinal deformities and concluded that the procedure was simple, less elaborated and require no spinal stabilization.

Stoma necrosis, a definite risk in constructing a divided colostomy especially in neonates, could occur in over 20% of patients. In their article, Mshelbwala and co-workers described a technique that avoids injury to the marginal artery during a divided colostomy in neonates. This technique, which identifies, displaces and preserves the marginal artery (thereby averting stoma necrosis) also reduces the risk of blood loss and had been successfully used by the authors in 77 neonates over a 6-year period. It is hoped that surgeons and surgical trainees who may handle these patients on first presentation will imbibe this principle.

In nearly one-decade prospective analysis of 100 cases, Iseh documented this experience in the surgical management of cystic lesions of the upper jaw in two tertiary institutions in Nigeria. He noted that though these lesions are rare, they can mimic tumours and cause facial asymmetry, and that complete surgical excision (not aspiration) remains the treatment of choice. He pointed out that efforts should be made to exclude the co-existence of malignancies with these lesions, especially in the elderly. Could mechanical intestinal obstruction be thought to have resulted from an appendix? Those who said 'no' have been proven wrong by Lukong et al. In a spectacular report, they highlighted the case of a 10 year old boy with an intra-operative diagnosis of appendiceal knotting through which a loop of terminal ileum herniated, resulting in intestinal obstruction. This report increases our diagnostic armamentarium in patients with mechanical intestinal obstruction.

The journey continues with the innovative work of Ogbemudia et al, in their captivating description of an open interlocked nailing without targeting device or x-ray guide in revision surgery for non-union of the femur. This illustrates the application of appropriate technology. Bello et al led us through the report of a lady with Vesical calculus secondary to knitting needle in the bladder, who presented with both irritative and obstructive lower urinary symptoms. They pointed out that vesical calculi commonly complicate foreign bodies (FBs) and concluded that such FBs should be suspected in female patients with chronic lower urinary symptoms even in the absence of trauma or intervention.

There are lots more to digest! Professor Shehu again takes us to a final destination in his tantalizing description and step-by-step illustration of this own method of repairing meningocele in "HOW I DO IT". He emphasized the need for anatomical tissue restoration and acknowledged that special tissue transfer methods may be employed for closing the skin in very large defects. He then diligently highlighted the general pitfalls in the surgical treatment of this important Neurosurgical condition.

It is my sincere hope and desire that you find this maiden edition, and of course subsequent editions of the journal, a necessary companion in your day-to-day surgical endeavours.

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