

**PAPERS READ BEFORE THE 59TH ANNUAL MEETING OF THE PACIFIC COAST
SURGICAL ASSOCIATION, SAN FRANCISCO, FEB 21 TO FEB 24, 1988**

Medical Advances During the Civil War:	
Presidential Address	1045
F. William Blaisdell, MD, Sacramento, Calif	
Presentation of the Murphy Gavel	1051
Wiley F. Barker, MD, Los Angeles	
Experience With the Endorectal Ileal Pullthrough With Lateral Reservoir for Ulcerative Colitis and Polyposis	1053
Eric W. Fonkalsrud, MD; Matthias Stelzner, MD; Nancy McDonald, RN, Los Angeles	
A short lateral reservoir constructed after colectomy produces the best results.	
The Treatment of Breast Cancer: II. A 20-year Follow-up and Reappraisal of the En Bloc Principle	1059
Clare G. Peterson, MD, Portland, Ore	
The magnitude, completeness, and quality of an en bloc operation were important for survival.	
Nonanatomic Hepatic Resection for Secondary Hepatic Tumors With Special Reference to Hemostatic Technique	1063
David A. Brown, MD; Rodney F. Pommier, MD; Eugene A. Woltering, MD; William S. Fletcher, MD, Portland, Ore	
Nonanatomic resections were associated with less blood loss, shorter operations and hospital stay, and no differences in long-term survival.	
Indolent Presentation of Pancreatic Abscess: Experience With 100 Cases	1067
Aaron S. Fink, MD, Jonathan R. Hiatt, MD, Los Angeles; Henry A. Pitt, MD, Baltimore; Robert S. Bennion, MD; Luis R. DeSouza, MD; Robin D. McCoy, MPH; James H. Meyer, MD; Jesse E. Thompson, Jr, MD; Joseph L. Webster, MD; Samuel E. Wilson, MD, Los Angeles	
Many patients had no abdominal tenderness and normal amylase determinants and white blood cell counts.	
Clinical Implications of Procoagulant and Leuko-attractant Formation During Intraoperative Blood Salvage	1073
Maureen H. Bull, MD; Brian S. Bull, MD; Glen S. Van Arsdell, MD; Louis L. Smith, MD, Loma Linda, Calif	
A number of recommendations are made to reduce the procoagulant and leukoattractant material during autologous blood salvage.	
Practical Aspects in the Diagnosis and Management of Cystosarcoma Phyllodes	1079
John Hart, MD; Lester J. Layfield, MD; William E. Trumbull, MD; Donald Brayton, MD; Wiley F. Barker, MD; Armand E. Giuliano, MD, Los Angeles	
Benign and malignant cystosarcoma phyllodes may be treated by wide local excision with tumor-free margins.	
Effect of Total Parenteral Nutrition on Hepatic Histology	1084
Bruce M. Wolfe, MD; Brian K. Walker, MD; Donald B. Shaul, MD; Lester Wong, MD; Boris H. Ruebner, MD, Sacramento, Calif	
Prior liver disease, renal failure, and abdominal sepsis, but not TPN, produced liver histopathology.	
Surgical Resection for Metastatic Melanoma to the Lung	1091
Jan H. Wong, MD; David M. Euhus, MD; Donald L. Morton, MD, Los Angeles	
In selected patients with melanoma metastatic to the lung, resection provided a 25% five-year survival rate.	

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Orlo H. Clark, MD, San Francisco Awareness of the potential position of parathyroid glands in the mediastinum should decrease missed glands.	
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Daniel J. Ledbetter, MD; Edwin I. Hatch, Jr, MD; Kenneth W. Feldman, MD; Corinne L. Fligner, MD; David Tapper, MD, Seattle Child abuse should be suspected when young children have unexplained hollow viscus injuries.	
The Role of Arterial Reconstruction in Penetrating Carotid Injuries	1106
Fred A. Weaver, MD; Albert E. Yellin, MD; Willis H. Wagner, MD; Samuel H. Brooks, ScD; Arthur A. Weaver; Mark A. Milford, MD, Los Angeles Arterial reconstruction is the best treatment for all carotid injuries.	
Required Surgical Therapy in the Pediatric Patient With Dermatomyositis	1117
Earl C. Downey, Jr, MD; Morton M. Woolley, MD; Virgil Hanson, MD, Los Angeles Surgical therapy may be necessary in patients with dermatomyositis because of bowel perforations, abscesses, and calcific deposits.	
Resection of Malignant Bone Tumors of the Pelvic Girdle Without Extremity Amputation	1121
James F. Huth, MD; Jeffrey J. Eckardt, MD; Giovanni Pignatti, MD; Frederick R. Eilber, MD, Los Angeles When wide local excision or internal hemipelvectomy without amputation was possible, the results were quite satisfactory.	
Improved Treatment of Intra-abdominal Abscess: A Result of Improved Localization, Drainage, and Patient Care, Not Technique	1126
Clifford W. Deveney, MD, Portland, Ore; Kevin Lurie, MD, Detroit; Karen E. Deveney, MD, Portland, Ore The important thing about treating abscesses is drainage—however you do it.	
Complications of Prematurity That May Require Surgical Intervention	1135
Marshall Z. Schwartz, MD; Steven B. Palder, MD; Kenneth R. T. Tyson, MD; Clifford C. Marr, MD, Sacramento, Calif A patent ductus arteriosus and necrotizing enterocolitis occurring together is associated with a high mortality.	
Selective Management of Abdominal Stab Wounds: Importance of the Physical Examination	1141
Robert M. Shorr, MD; Michael M. Gottlieb; Kenneth Webb, RN; Leonard Ishiguro; Thomas V. Berne, MD, Los Angeles Repeated physical examinations help in the management of abdominal stab wounds.	
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Mary J. Vassar, MS; Jeff Moore, MD; Colleen A. Perry, RN; Johnese Spisso, RN; James W. Holcroft, MD, Sacramento, Calif A large positive fluid balance in the first 24 hours after injury was associated with a greater likelihood of pulmonary failure and death.	
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Sandra L. Beal, MD, Johnese M. Spisso, RN, Sacramento, Calif Following splenorrhaphy in 119 patients, 11 patients required blood transfusions, reoperation, or splenectomy.	
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Arteriovenous Graft Life in Chronic Hemodialysis: A Need for Prolongation	1169
Donald D. Bell, MD, John J. Rosenthal, MD, Long Beach, Calif Thrombectomy, removal of neointimal hyperplasia, and patch angioplasty will help preserve arteriovenous grafts.	
Hematuria Following Blunt Abdominal Trauma: The Utility of Intravenous Pyelography	1173
Stanley Klein, MD; Stephen Johs, MD; Roy Fujitani, MD; David State, MD, Torrance, Calif Intravenous pyelography and nephrotomography should be reserved for patients with more than 30 red blood cells per high-power field on initial urinalysis.	
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