

EDITORIAL

- The New England Surgical Society** 529
Claude H. Organ, Jr, MD, Oakland, Calif
- PAPERS READ BEFORE THE 69TH ANNUAL MEETING OF THE NEW ENGLAND SURGICAL SOCIETY, MONTREAL, CANADA, SEPT 15 TO SEPT 17, 1988**
- Seldom Come By: The Worthwhileness of a Career in Surgery** 530
Clement A. Hiebert, MD, Portland, Me
- Lung Transplantation: Samuel Jason Mixter Lecture** 535
F. Griffith Pearson, MD, FRCSC, Toronto, Canada
- Management of General Surgical Complications Following Cardiac Transplantation** 539
Verdi J. DiSesa, MD; Robert L. Kirkman, MD; Nicholas L. Tilney, MD; Gilbert H. Mudge, MD;
John J. Collins, Jr, MD; Lawrence H. Cohn, MD, Boston, Mass
● In 11 of 12 patients undergoing heart transplantation, an aggressive approach to abdominal complications was successful.
- Ibuprofen Causes Reduced Toxic Effects of Interleukin 2 Administration in Patients With Metastatic Cancer** 542
Timothy J. Eberlein, MD; Deric D. Schoof, PhD; Hamish R. Michie, FRCS; Anthony F. Massaro;
Ulrike Burger; Douglas W. Wilmore, MD; Richard E. Wilson, MD, Boston, Mass
● The cyclooxygenase inhibitor ibuprofen reduced toxicity but not the rate of response to interleukin 2 therapy.
- Tamoxifen as an Alternative to Surgical Resection for Selected Geriatric Patients With Primary Breast Cancer** 548
Richard G. Margolese, MD, Montreal, Canada, Roger S. Foster, Jr, MD, Burlington, Vt
● Eighteen of 30 elderly patients had regression of the primary tumor with tamoxifen therapy alone.
- Primary Cancer of the Liver: Evaluation, Treatment, and Prognosis** 552
William V. McDermott, MD; Blake Cady, MD; Basil Georgi, MD; Glenn Steele, Jr, MD; Urmila Khettry, MD, Boston, Mass
● Median survival in patients with a tumor in a normal liver was 32 months as compared with 19 months in patients with tumors and chronic liver disease.
- Management of Biliary Obstruction: A Comparison of Percutaneous, Endoscopic, and Operative Techniques** 556
Janice G. Rothschild, MD; Marshall M. Kaplan, MD; Victor G. Millan, MD; Randolph B. Reinhold, MD, Boston, Mass
● Endoscopic therapy was safe and helpful with stone disease as compared with percutaneous hepatic drainage, but an abdominal operation seemed better for malignancy.
- Liver Abscess: The Need for Complete Gastrointestinal Evaluation** 561
Jeffrey L. Cohen, MD, Hartford, Conn; F. Maureen Martin, MD, Boston, Mass;
Ricardo L. Rossi, MD, David J. Schoetz, Jr, MD, Burlington, Mass
● The pyogenic liver abscess often has a disease process in the biliary or gastrointestinal tract.
- Intrahepatic Cholangiojejunostomy as a Palliative Procedure in Primary Sclerosing Cholangitis** 565
James R. Goldenring, MD, PhD, C. Elton Cahow, MD, New Haven, Conn
● Effective palliation was provided by intrahepatic cholangiojejunostomy if secondary biliary cirrhosis had not developed.

The ARCHIVES OF SURGERY (ISSN 0004-0010) is published monthly by the American Medical Association, 535 N Dearborn St, Chicago, IL 60610, and is an official publication of the Association. Second-class postage paid at Chicago, IL 60610, and at additional mailing office.

SUBSCRIPTION RATES—The subscription rates for the ARCHIVES OF SURGERY are as follows: \$50 for one year, \$85 for two years in the United States and US possessions; all other countries, one year, \$60; two years, \$105 for surface delivery. (For expedited air delivery to most countries, add \$15 surcharge for one year subscription, \$30 for two years.) Rates for subscriptions for delivery to Japan or South Korea are available through exclusive agents—contact the publisher. **Special rates for residents and medical students in the United States and US possessions are available.** Address inquiries to the American Medical Association, Circulation

and Fulfillment Division, 535 N Dearborn St, Chicago, IL 60610. Phone: (312)280-7168.

CHANGE OF ADDRESS—POSTMASTER, send all address changes to the ARCHIVES OF SURGERY, Attention: Subscription Department, 535 N Dearborn St, Chicago, IL 60610. Notification of address change must be made at least six weeks in advance, include both old and new addresses, a recent mailing label, and your new zip code.

Advertising Principles: Each advertisement in this issue has been reviewed and complies with the principles governing advertising in AMA scientific publications. A copy of these principles is available on request. The appearance of advertising in AMA publications is not an AMA guarantee or endorsement of the product or the claims made for the product by the manufacturer.

CONTENTS—Continued

Intraleural Regional Analgesia for Pain Management in Cholecystectomy 568
Moustafa A. El-Naggar, MD; Frank J. Schaberg, Jr, MD; Martin R. Phillips, MD, Pawtucket, RI
● Insertion of an intraleural catheter and injection of 30 mL of bupivacaine provided prolonged pain relief after cholecystectomy.

Management of Pancreatic Fistulas 571
F. Maureen Martin, MD; Ricardo L. Rossi, MD; J. Lawrence Munson, MD; Stephen G. ReMine, MD; John W. Braasch, MD, Burlington, Mass
● Fistulas associated with pancreatitis are the most heterogeneous and difficult to manage.

Cholecystokinin Augmentation of ‘Surgical’ Pancreatitis: Benefits of Receptor Blockade 574
Irvin M. Modlin, MD; Anton J. Bilchik, MD; Karl A. Zucker, MD; Thomas E. Adrian, PhD, MRCPath; Jeffrey Sussman, MD; Scott M. Graham, MD, New Haven, Conn
● Cholecystokinin (CCK) potentiated and a CCK receptor blocking agent decreased the severity of experimental pancreatitis.

Selective Nonoperative Management of Blunt Splenic Trauma in Adults 581
James R. Elmore, MD; David E. Clark, MD; Robert J. Isler, MD; William R. Horner, MD, Portland, Me
● Multiple injuries, age over 64 years, and a requirement for more than 2 U of blood indicate the now frequent need for a laparotomy.

Progress in Experimental Porcine Small-Bowel Transplantation 587
Hironori Kaneko, MD; Wayne Hancock, MD, PhD; Robert T. Schweizer, MD, Hartford, Conn
● Successful small-bowel transplantation can be achieved with adequate immunosuppression in a large animal.

Use of the Triplex Scanner in Diagnosis of Deep Venous Thrombosis 593
Alfred V. Persson, MD; Catherine Jones; Russell Zide; Edward R. Jewell, MD, Burlington, Mass
● The results of triplex scanning can be safely used alone to diagnose or exclude deep venous thrombosis.

The Impact of an Ambulatory Surgical Service in a Community Hospital 601
Horace A. Laffaye, MD, New Haven, Conn
● The average savings per patient having an operation on an ambulatory basis was \$2000 and 3.07 hospital days.

Routine Intraoperative Angioscopy in Lower Extremity Revascularization 604
Arnold Miller, MD, ChB; David R. Campbell, MD; Gary W. Gibbons, MD; Frank B. Pomposelli, Jr, MD; Dorothy V. Freeman, MD; Stephen J. Jepsen, MD; Robert S. Lees, MD; Jonathan L. Isaacsohn, MD; David Purcell, MD; Mark Bolduc, MD; Frank W. LoGerfo, MD, Boston, Mass
● Intraoperative angioscopy is a good alternative to the intraoperative arteriogram in monitoring the technical effectiveness of the procedure.

Limb Salvage Despite Extensive Tissue Loss 609
Jack L. Cronenwett, MD; Martha D. McDaniel, MD; Robert M. Zwolak, MD, PhD; Daniel B. Walsh, MD; Joseph R. Schneider, MD; William F. Reus, MD; Lawrence B. Colen, MD, Hanover, NH
● Ninety-three percent of limbs that would have required amputation were salvaged by combining revascularization with reconstruction.

Recent Experience With Thoracoabdominal Aneurysm Repair 620
Richard P. Cambria, MD; David C. Brewster, MD; Ashby C. Moncure, MD; Bengt Ivarsson, MD; R. Clement Darling, MD; J. Kenneth Davison, MD; William M. Abbott, MD, Boston, Mass
● The risk/benefit ratio in most patients seems to be weighted toward elective resection.

Splenectomy: The Treatment of Choice for Human Immunodeficiency Virus–Related Immune Thrombocytopenia? 625
Thanjavur S. Ravikumar, MD; J. Davis Allen, MD; Albert Bothe, Jr, MD; Glenn Steele, Jr, MD, Boston, Mass
● Splenectomy provided a durable and lasting response for human immunodeficiency virus-related thrombocytopenia.

ORIGINAL ARTICLE

Gallstone Disease: The Clinical Manifestations of Infectious Stones 629
Alison L. Smith, MD; Lygia Stewart, MD; Robert Fine, MD; Carlos A. Pellegrini, MD; Lawrence W. Way, MD, San Francisco, Calif
● Gallstone disease is more virulent in patients whose gallstones contain bacteria.

REGULAR DEPARTMENTS

Correspondence and Brief Communications 636

Books 637

Index to Advertisers 580

Instructions for Authors 520