

James Hogarth Pringle and his time-honored maneuver

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The classical method to control blood loss during parenchymal transection of the liver is the Pringle maneuver. In his landmark article in the Annals of Surgery in 1908, James Hogarth Pringle occluded the afferent vessels to the liver by compressing the hepatoduodenal ligament between his thumb and index finger (1). He applied this maneuver in eight patients who required emergency laparotomy for major hemorrhage after severe liver trauma. Although he succeeded in controlling blood loss, the eight patients he described unfortunately all died. This outcome did not prevent the Annals of Surgery from publishing his report after which James Hogarth Pringle was ready to enter the 'Hall of Fame'. Vascular inflow occlusion, applied in a continuous or intermittent fashion, became the mainstay technique for reducing blood loss during liver transection, and has remained so in the present era of laparoscopic and robotic liver resection (2).

The photograph shows Mr. Pringle—the surgeon with the moustache on the right—in the operating room of the Royal Infirmary in Glasgow at the beginning of the 20th century (*Figure 1*). He is operating with Sir William Macewen, at that time chief of the surgical department at the Royal Infirmary. James Hogarth Pringle was born in Australia in 1863 and graduated at the University of Edinburgh Medical School in 1885. He was appointed Lecturer in Surgery in 1899 at Margaret College in Glasgow in which he proved an early proponent of accepting female trainees in the clinic (3).

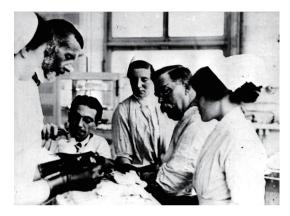


Figure 1 James Hogarth Pringle, the surgeon with the moustache standing on the right, operating with Sir William Macewen in the operating room of the Royal Infirmary in Glasgow (beginning 20th century).

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Figure 1 is a photograph from collection of the Royal College of Physicians and Surgeons of Glasgow. Funding: None.

Footnote

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References

- 1. Pringle JH. V. Notes on the Arrest of Hepatic Hemorrhage Due to Trauma. Ann Surg 1908;48:541-9.
- 2. Mownah OA, Aroori S. The Pringle maneuver in the modern era: A review of techniques for hepatic inflow occlusion in minimally invasive liver resection. Ann Hepatobiliary Pancreat Surg 2023;27:131-40.
- 3. James Hogarth Pringle, 1863–1941. The Glasgow Royal Infirmary. Br J Surg 1964;51:241-5.