



## Surgical stabilization of rib fractures

Surgical stabilization of rib fractures (SSRF) is a very rapidly developing field in medicine. Rib fractures are very common and cause a lot of disability for the patients. Only in the last decade has SSRF been popularized. With the recognition of the amazing healing power of this procedure, many patients are being helped. However, there is still resistance in some communities to adopt this revolutionizing approach. Therefore, it is more important for us to promote the usefulness of this procedure so that as many patients as possible can benefit.

Since it is a new specialty, knowledge, and skills are still being developed. New questions are generated and need answers. As a result, it is time for a special issue of the *Journal of Thoracic Disease* to address this latest hot topic in medicine. The idea of this special issue was conceived a year ago and we are very glad that it was met with overwhelming enthusiasm with many authors promptly agreed to contribute right away and many invaluable manuscripts were sent in right away.

Dr. Fredric M. Pieracci *et al.* addressed a very important research issue on “Barriers to conducting a multi-center randomized controlled trial of surgical stabilization of rib fractures (and how to overcome them)” and discussed another important technical issue on “Completely thoracoscopic surgical stabilization of rib fractures: can it be done and is it worth it?”.

Dr. D. Benjamin Christie III *et al.* addressed issues regarding the elderly and the young in “Geriatric chest wall injury: is it time for a new sense of urgency?” and “Chest wall stabilization and rib plating in 15-year-old male adolescent after blunt thoracic trauma”.

Rib fractures can be associated or due to some special situations. Dr. Ledford Powell *et al.* addressed diaphragmatic injuries in “Experience with acute diaphragmatic trauma and multiple rib fractures using routine thoracoscopy”, Dr. D. Benjamin Christie III *et al.* addressed “Chest wall stabilization with rib plating after cardiopulmonary resuscitation” while Dr. Qiang Zhang *et al.* shared with us “Two uncommon cases of thoracic aortic injury caused by rib fractures”.

From the technical standpoint, Dr. Patrick Greiffenstein *et al.* shared with us their experience in “Three common exposures of the chest wall for rib fixation: anatomical considerations” while Dr. Marcel Tafen *et al.* introduced “Costotransverse screws in repair of paraspinal rib fractures—a novel approach for rib fractures threatening the aorta”.

Two articles addressed situations after surgery. Dr. Patrick Greiffenstein *et al.* shared with us “Treatment of symptomatic intercostal heterotopic ossification after surgical stabilization of rib fractures: report of two cases and review of the literature” and addressed “Closed chest compressions after rib plating”.

Finally, three comprehensive review articles came from China: Dr. Yi Yang *et al.* on “Chest wall stabilization (CWS) in China: current situation and prospect”, Dr. Qiang Zhang *et al.* on “Recent advances in rib fracture fixation” and Dr. Enwu Xu *et al.* on “The ideal methods for the management of rib fractures”.

This is truly a remarkable and international special issue on SSRF. We thank all the distinguished authors for their time and effort in contributing. We thank Sarah Ann Whitebeck for her invaluable suggestions and the editorial office for their tireless effort in making this special issue a timely success!

### Acknowledgements

None.



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doi: 10.21037/jtd.2019.05.01

*Conflicts of Interest:* The authors have no conflicts of interest to declare.

**View this article at:** <http://dx.doi.org/10.21037/jtd.2019.05.01>

**Cite this article as:** Suen HC, White TW. Surgical stabilization of rib fractures. J Thorac Dis 2019;11(Suppl 8):S1022-S1023. doi: 10.21037/jtd.2019.05.01