

Preface

Learning Through Failure and the Way Forward



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Editor

It is a big honor to be the guest editor for this issue of *Foot and Ankle Clinics of North America*. Being guest editor is harder than I ever thought and more rewarding than I could have ever imagined. Orthopedic Foot and Ankle Surgery has advanced dramatically over the last years, notably due to new procedures that have also given rise to new complex scenarios for revision surgery. The additional surgical demands presented by complex deformities after failed surgeries have stimulated the adage that “necessity is the mother of invention” Complex deformities are usually the result of complex cases with suboptimal results and are disheartening to surgeons and devastating for our patients. Sometimes, good index surgery can be negated by noncompliant patients and metabolic disorders, but some other times the type of surgery was not the best approach for the problem, it was not well executed, or both. Revisional surgery not only challenges surgical skills but also tests the surgeon’s ability to interact with patients, industry, and other colleagues/specialists, and to plan for the best implants and biologics to get things right. Although living in an era of joint-preserving surgery, severe deformity and extensive joint damage oblige us to perform big deformity corrections with arthrodesis. A big problem needs a big hammer (and this issue). The surgeon needs to explain to a patient why a previous surgery failed and why the new salvage procedure with an arthrodesis might work. Ultimately, the patient’s needs must be placed at the center of this decision-making process. Sometimes the best option is to not operate at all but, when it comes to surgery, sometimes the only alternative to complex reconstruction with arthrodesis is an amputation.

The ability and capacity to successfully address complications and failed surgeries are not easily learned from literature but rather are an art that we all learn from our mentors and colleagues, as well as from experience through our own successes and failures. I expect the articles you are about to read will be helpful when facing challenging cases and stimulate your imagination. Our own “road of failure” should not cultivate a

culture of blame but rather motivate and inspire us to drive improvement into our surgical practice. I am confident that cultural and cognitive diversity from the different expert authors in this issue will lead you to the most suitable way forward whenever you are planning a complex arthrodesis for a complex unconventional case.

The issue you have ahead would have not been possible without my mentor and friend Mark Myerson offering me to coordinate this issue and without the Consulting Editor, Cesar de Cesar Netto, inspiring me through the process of editing with his passion in steering *Foot and Ankle Clinics of North America* from strength to strength. They both have given me the opportunity to gather an outstanding group of colleagues and friends. I am privileged to present authors with wide experience in complex arthrodesis who provide us with examples of severe foot and ankle deformities, highlighting tips and tricks that are the result of years of learning through failure and expertise. They have done a tremendous job of giving rational approaches to complex deformities with arthrodesis and simplifying the complex so that their clear ideas enter our brains quicker and stay there longer. It has been an honor to work with each of them, and I have learned from them all. This issue would not have been possible without the help and support from Arlene, Megan, and all the Elsevier team in the backstage. My gratitude for their editorial help, keen insight, and ongoing support that have been essential to bring all articles to production and to you.

I wish you happy reading!

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