



Trachea and Lung Surgery in Childhood (Progress in Pediatric Surgery)

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With improvements in respirator therapy and intensive care, congenital malformations and various acquired pathologic deformities of the trachea or bronchi are more often observed than used to be the case. For a while it seemed that tracheostomy would be unnecessary, but it has since become quite clear that severe disturbance of the trachea would be the outcome owing to primary or secondary pathologic changes that had not been given adequate consideration previous. These changes can lead to urgent life-threatening episodes or definite mutilation for the rest of the child's life. Tracheal surgery thus repre sents a new and special challenge for the pediatric surgeon. A solution to these serious problems must be found and merits discussion. Further more, it seems worthwhile to review cases of surgical pulmonary dis eases, except for the already widely discussed problems of empyemas or bronchiectasis. P. WURNIG, Vienna Contents Pathophysiology of Subglottic Tracheal Stenosis in Childhood. B.MINNIGERODE and H.G.RICHTER. With2Figures 1 Subglottic Stenosis in Newborns After Mechanical Ventilation. M.MARCOVICH, F.POLLAUF, and K.BURIAN. With 3 Figures ... 8 Treatment of Congenital Cricoid Stenosis. R.N. P. BERKOVITS, E.J. VAN DER SCHANS, and J. C. MOLENAAR. With 7 Figures 20 Surgical Surgical Treatment of Congenital Laryngotracheo-oesophageal Cleft. R.N.P.BERKOVITS, N.M.A.BAX, and E.J. VAN DER SCHANS.

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