

Editorial





Philosophy of a profession or profession of a philosophy?

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"The purpose of pediatric surgery is to create a standard, not to operate a monopoly." - Sir D Brown.

Last thirty years, pediatric surgery has undergone a vigorous expansion in the fields of medicine and the endless prairies of materials scientific after the establishment of the great pillars of the pioneering '50s and '60s. Another big boost to the pediatric surgery is undoubtedly given by the same members of this specialty, more often than not big fans of their "job" (it's more than a job ...). And many of these in the world have achieved important results in basic research of diseases treated on a dailybasis, ensuring the necessary improvements in diagnosis and treatment. The most recent challenge was then to make with the use of modern technology surgery of child renal ways less invasive, to minimize the discomfort associated with the procedures and post-operative period¹ (dedicated nurses, pediatric anesthesiologists, pediatric settings).

Technology has an important role in the advancement of medicine, so even in the case of pediatric surgery. However, the principles upon which our subject must always be taken into due consideration. Robotics, and some other newly introduced methods in adults, require execution time which could refer young patients to anesthesia too long and excessive exposure to CO₂ Insufflation.²⁻⁵ Each new technique will be applied "under clinical-surgical", only after a careful and appropriate screening of "pre-clinical" and basic. Although it is a field of undoubted importance, which has as its center the surgical activity the child and the baby, not much is known and clear to the general public the figure of the pediatric surgeon who rarely took and takes the value of the media in modern society. Yet it is a bit of a surgeon "special", a surgeon "delicate", and "dedicated" that together with the parents must take daily decisions critical to the survival and health of children and to actasits Roman law "as a good father".

The specificity of the pediatric surgeon is working on the health of an individual growing, the premature infant weighing less than a pound, up to the so-called "Young Adults" who can file structure and weight similar to adult. Even in the execution of the most simple, such as a congenital inguinal hernia, the approach of the pediatric surgeon holds great importance in the concept of "body transformation and future development", as part of the body where act ion is taken must be dealt with in an appropriate manner so as not to adversely affect its future with the growth of the individual. We were taught by our teachers over the years of training that: "the child is not a small adult ...", in fact it is an individual act of becoming, with its very specific needs. Very bad make those surgeons who use techniques and technologies derived from adult surgery, without asking the doubts and specific problems that require surgery in childhood, or worse are those who believe that never was is the only pediatric surgeons because they have done to sometimes something in pediatric patients. Even in mild pediatric surgical oncology,6 there are specificities cannot be shared with surgery of the adult; the biology of some solid tumors, the study

of which is essential for the progress of matter, it has a prominent role in the choice of approach terapeutico (IL) pediatric surgeon tries his hand as a few other surgeons with almost all anatomical regions: neck, chest, abdomen, genitals, urinary tract, etc..., its specificity is then to be a surgeon... very "general", and so in different ages. There are therefore two specific matters: variable scale of the development and variability of anatomical body to be studied and treated in the same individual (e.g. absolute poly-malformations).

The greatest specificity of this profession is linked to the daily challenge to the correction of congenital malformations and this aspect that makes a pediatric surgeon reconstructive surgeon par excellence. In these cases, the success of the pediatric surgeon is measured not only with the survival of infants with malformations in itself incompatible with life, but also in its ability to ensure a good quality of life, but not for a few months or a few years, but for a time span of a lifetime of 70 years and beyond. The last consideration is one that remains central role in the human being, which never replace any opulent technology, core and soul of the profession of philosophy.

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Conflicts of Interset

None.

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