Advances in Wound and Trauma Care: 
A Military Perspective

“Let him who wishes to be a surgeon go to war.” — Hippocrates

Since 2001, the US armed forces have been involved in two major armed conflicts, Iraq and Afghanistan. These wars have resulted in the largest amount of US combat casualties since the Vietnam War. With this renewed influx of war wounds, orthopaedic surgeons have been forced to relearn some of the lessons of previous wars, as well as face unique challenges. Surgeons have renewed focus on wound management, delayed closures, external fixation, and amputation. The improvements in the military transport system and individual and vehicular armor have resulted in service members surviving previously lethal wounds. The development of improvised explosive devices (IEDs) has caused devastating limb injuries with vast zones of injury that have challenged reconstructive efforts.

This special issue of the Journal of Surgical Orthopaedic Advances grew out of a realization that the practice of military orthopaedic surgery in the current conflicts has resulted in a unique experience that has directed novel surgical techniques and research plans. This issue is not a comprehensive symposium on combat wounds, but it does include articles from many of the US experts on these complex injuries and the unique challenges presented. We have covered topics including epidemiology of combat wounds, heterotopic bone, negative-pressure wound dressings, amputations, and soft tissue coverage. I would like to personally thank all those associated with the journal and Society of Military Orthopaedic Surgeons who made this work possible. I am proud to dedicate this issue to the US service members who have fought for our country and the surgeons who work to “sustain the fighting force.”

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