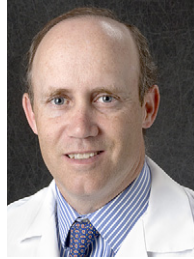


## Preface



Joseph J. Cullen, MD  
*Guest Editor*

Management of inflammatory bowel disease has undergone a tremendous evolution in the last 70 years. Operative management of Crohn's disease has progressed from surgeons advocating a bypass operation, which was considered much safer for a disease with high mortality for resection, to increased enthusiasm for resection after the advent of antibiotics and recognition of the cancer risk in the bypassed segment, to the latest innovation of stricturoplasty. For ulcerative colitis, the advent of proctocolectomy with Brooke ileostomy was a great initial surgical milestone that has advanced to the creation of continent anorectal pouches to maintain anorectal function. In addition to the surgical advances in inflammatory bowel disease, our understanding of the mechanisms of these diseases and options for medical therapeutics has also developed. Introduction of the anti-tumor necrosis factor agent infliximab has added to the armamentarium of the gastroenterologist in treating refractory Crohn's disease.

This issue of *Surgical Clinics of North America* is devoted to inflammatory bowel disease, and will be a reference for both medical and surgical disciplines involved in the treatment of patients with Crohn's disease or ulcerative colitis. Both medical and surgical therapy and complications of inflammatory bowel disease are discussed, along with potential new therapeutic options based on the mechanism of understanding of these diseases. Additionally, there is the ever-increasing dilemma of pathological diagnosis of inflammatory bowel disease as either Crohn's or ulcerative colitis, which is important for surgeons and gastroenterologists involved in the subsequent treatment.

Many of the authors have academic clinical practices that are devoted to various aspects of treating patients with inflammatory bowel disease, whereas others have active research laboratories devoted to studying the mechanisms involved in inflammatory bowel disease. I would like to thank the authors for taking time out of their busy practices or research laboratories for their invaluable contributions to this issue.

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