

EDITORIAL BY THE EDITOR-IN-CHIEF

Dear Readers

In the current issue, I particularly recommend an article by Professor Andrzej Szawłowski. Various segments of the large bowel may be suitable for restoring gastrointestinal continuity after resections of other organs (mainly after oesophagectomy and, to a lesser extent, gastrectomy). As an organ substitute, the colon can be used in urology for the reconstruction of the urinary bladder following cystectomy and in gynaecology for vaginal reconstruction. Although so far not given much space in the literature, this topic is interesting, and the paper is enriched with drawings presenting the anatomy as well as basic information on different surgical techniques.

In this issue, you will also find a paper comparing stapled versus conventional haemorrhoidectomy. As in the case of most surgical procedures, proper patient qualification is the key to therapeutic success in stapled surgery.

I also encourage you to familiarise yourselves with a case report of a rare complication after gynaecological surgery in the form of faecal incontinence, which occurred in a patient after posterior vaginal repair. The authors emphasize the importance of anal sphincter rehabilitation in the treatment of incontinence. The described patient achieved full symptom resolution after sphincter training.

In the historical section, Professor Maria Ciesielska introduces us to Professor Franciszek Raszeja, an orthopaedist who worked at the Red Cross Hospital in Warsaw. Forgotten by his contemporaries, this outstanding doctor and co-founder of the Polish Orthopaedic Society was murdered in the Warsaw Ghetto during a medical visit to a Jewish patient. As once André Malraux said: "Without the past, there is no present or future" – therefore, it seems worth reaching back to history from time to time.



I wish you a pleasant read.

Editor-in-Chief Professor Małgorzata Kołodziejczak, MD