A most precious treasure which I have cherished throughout the past 50 years of my life has been my continuous special friendship with the accomplished senior editor of this tome, Dr. Ezra Steiger, whom I met during his internship in surgery at the Hospital of the University of Pennsylvania in 1967, shortly after he graduated from medical school at the Ohio State University. I was most impressed with his exceptionalism from the time we first met, and this subjective feeling was strongly confirmed by his consistently superior character and performance in a highly competitive surgery training program, in which he was awarded, “Surgery Intern of the Year” honors. I was fortunate to attract him to join our original Nutrition Support Team, known then as the “Hyperalimentation Team,” and for the next 5 years, we worked together with our other colleagues in this rapidly growing multidisciplinary neophyte team to develop novel techniques, principles, and practices; and to gain experience in providing optimal parenteral nutrition support to the most critically ill, complex, complicated surgical patients on the University of Pennsylvania Affiliated Services while teaching our students, residents, fellows, colleagues, patients, and families how to provide adequate or optimal nutrition support for all conditions, under all circumstances, at all times, effectively, competently, and safely. This included simultaneous and concomitant investigative efforts in the basic science laboratories of the Harrison Department of Surgical Research, and the Clinical Research Center and clinical service areas of the University Hospitals in order to advance the art and science of optimal nutrition support and to apply and translate what was learned or proven to be successful, safe clinical management of surgical patients, who previously had high morbidity and mortality rates. Indeed, the ultimate clinical challenges were the patients with short bowel syndrome, virtually all of whom, at that time, died secondary to severe malnutrition and/or its complications.

By the time that Dr. Steiger had completed his Surgery Residency and Research Fellowship in 1973 and left UPENN for Keesler Air Force Base; and I had moved to Houston to help start the Department of Surgery at the new University of Texas Medical School at Houston, our embryonic nutrition support team had matured and had made innovative contributions to nutrition support, which had promoted and induced significant changes in the way surgery was practiced, not only in the United States, but throughout the world.

Dr. Steiger earned his credentials as a pioneer in surgical nutrition support by investing countless hours and seemingly endless energy in providing exquisite personal care to critically ill patients whose nutrition could not be provided via their severely compromised gastrointestinal tracts, either adequately, or at all. He helped to develop and perfect techniques and technology for achieving safe central venous access, long-term central venous concentrated nutrient infusion, and ambulatory total parenteral nutrition. Indeed, he
participated in caring for the first ever home parenteral nutrition patient in 1968. In addition to his heavy and demanding clinical responsibilities, he worked diligently and persistently in the basic laboratory for almost 2 years perfecting a continuous central intravenous infusion rat model which enabled and enhanced the acquisition of invaluable experience and knowledge to the developing parenteral nutrition field, and spawned countless experimental nutritional, metabolic, and pharmacologic studies in rodents and other small animals throughout the world to this day.

In 1975, he joined the Department of Surgery of the Cleveland Clinic, where his contributions have been myriad and legendary; and are too numerous to delineate comprehensively in this synopsis. Suffice it to say that for more than 4 decades, Dr. Steiger has maintained an active clinical practice, primarily in the management of complex disorders of the alimentary tract, especially those having significant comorbidities related to inadequate nutrition, notably inflammatory bowel disease, ulcerative colitis, gastrointestinal neoplasms, and other conditions accompanied by, or leading to, intestinal failure or short bowel syndrome requiring special forms of nutritional support to achieve optimal outcomes, and in many cases, to save lives. He initiated the Nutrition Support Team, the Home Parenteral Nutrition Program, and the Intestinal Rehabilitation Program of the Cleveland Clinic and built the Home Infusion Therapy Service at the Cleveland Clinic, serving as its first Medical Director and as a member of its governing board for many years. He also served as vice chairman of the Department of General Surgery and Head of the Section of Surgical Nutrition, president of the Medical Staff and as a member of the Board of Trustees of Cleveland Clinic. Since 2005, he has held the rank of professor of Surgery in the Cleveland Clinic Lerner College of Medicine, where he currently is a consultant in General Surgery and Gastroenterology in the Digestive Disease and Surgery Institute of the Cleveland Clinic, actively involved in managing patients requiring nutritional support in the hospital and at home, and evaluating and managing patients with short gut syndrome. He was elected president of the American Society of Parenteral and Enteral Nutrition in 1984 and honored by election to Fellowship in A.S.P.E.N. (FASPEN) in 2011. He has been an active investigator throughout his career and has almost 400 publications to his credit to date.

This abbreviated chronicle of his career is de facto manifest evidence of his incredible contributions to optimal nutritional support of patients with compromised alimentary tract function and demonstrates the growth, development, and advancement of the field of nutrition support simultaneously with the progression of the professional career of Dr. Steiger from the management of patients with significant malnutrition and requiring a major surgical procedure to the ultimate clinical challenge of adult short bowel syndrome, most especially the patient requiring intestinal transplantation for maximal nutritional rehabilitation via the gastrointestinal tract. Dr. Steiger is truly a pioneer surgeon/scientist and icon in the field of nutritional support, and an acknowledged international expert in the management of patients with adult short bowel syndrome and intestinal transplantation. He and his most able and distinguished colleagues and coeditors, Dr. Kristen Roberts and Mandy L. Corrigan, have assembled and presented a concise and relevant body of knowledge, information, experience, judgement, and wisdom in this most critically important area of nutritional and surgical endeavor, which is highly likely to serve as an invaluable utilitarian and consummate reference source for all members of the scientific and
clinical multidisciplinary health care community in this challenging, exciting, and rapidly advancing field. Their production represents the essence of the current state of the art and science of comprehensive management of adult short bowel syndrome, condensed into sixteen logical and rational chapters, written by them and 24 others of the foremost clinician/scientists in the world. It will undoubtedly and adequately serve the needs of the entire range of individuals interested in providing competent, proficient, integrated, comprehensive, safe management and support of patients with short gut syndrome—the ultimate manifestation of intestinal failure. We are most grateful to this special group of dedicated clinician/investigators/authors/editors, not only for the expertise they are sharing with those of us who strive to provide optimal, effective, compassionate care for patients with this quintessential life-threatening situation, but also for the stimulation that their reported efforts will provide for our future innovations and advancements in the optimal management of this most devastating and challenging clinical problem.

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