PREFACE

Diverticular Disease

To paraphrase Jane Austin, it is a truth universally acknowledged that a patient experiencing symptoms of diverticular disease is in want of a good physician. Although noted for hundreds of years, the first clear pathological description of diverticula of the colon was noted only recently by Cruveilhier in 1849. He wrote “we not infrequently find between the bands of longitudinal muscle fibers in the sigmoid a series of small, dark, pear-shaped tumours, which are formed by herniae of the mucous membrane through the gaps in the muscle coat”.¹ Many authors have given clinical accounts of diverticular disease including Virchow (1853), Habershon (1857), and Sydney Jones (1858) but the first paper to arouse the interest of the medical community was attributed to Graser in 1899.² He pointed out that diverticulosis was far from uncommon and described the changes resulting from inflammation around the diverticula, what he termed peridiverticulitis. Beer described 15 complicated cases of diverticulitis in 1904.³ He described sigmoid stenosis, free perforation, localized peritonitis, abscess formation, and colovesicle fistulae. In 1907, Mayo reported a series of five resections

of the colon for diverticulitis.⁴ Carman first reported the radiological findings of three cases of diverticulitis of the colon in 1915.⁵ The list of authors on the subject of diverticular disease goes on and on with the best and the brightest of each generation contributing their thoughts to the medical literature.

The authors for this issue of *Clinics in Colon and Rectal Surgery* epitomize the good physicians that are desired by patients. In addition to having superb theoretical knowledge, these authors have labored in the field of colon and rectal surgery and have the sort of judgment that comes only from hands-on experience. For this issue, they have limited the scope of their research, mined the mountains of information in the medical literature, and produced narrowly focused papers on facets of diverticular disease. With these articles, they extend the unbroken chain of reports that extends back over the last century, documenting the progress in the understanding and treatment of diverticular disease of the colon. I am grateful to the authors for the time spent away from their families and busy careers and applaud them for their excellent work.

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