We dedicate this Eighth Edition of Rockwood and Green’s: Fractures in Adults to Charles A. Rockwood, Jr, MD, and David P. Green, MD, who served as our inspiration and mentors for carrying on the revision and update of this textbook.

To Susan for her patience and understanding during my 30-year tenure on the editorial board.

JDH

To the future: Emily, Jessica, and Rosie.

CCB

To my children Sacha, Tyler, Robbin, and Everett for enriching my life every day, and my partner Niloo for her love and support.

MMcK

To Caroline, Elizabeth, and William without whom life would be easier but much less fun.

MMcQ

To Ann, Michael, and Luke, my reasons for being, for their patience, love, and support.

WMR

To my mother Phyllis, who found the best in people, had compassion for all, and whose insight, guidance, and love have always made me believe that anything is possible.

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The eighth edition of Rockwood and Green's: Fractures in Adults continues with the changes that were instituted in the seventh edition. In this edition there are two more chapters and 61 new authors drawn from three continents and 11 different countries. In addition, many of the new authors represent the next generation of orthopedic trauma surgeons who will be determining the direction of trauma management over the next two or three decades.

Orthopedic trauma continues to be an expanding discipline, with change occurring more quickly than is often realized. When Drs. Rockwood and Green published the first edition in 1975, there were virtually no orthopedic trauma specialists in most countries, fractures were usually treated nonoperatively, and mortality following severe trauma was considerable. In one generation the changes in orthopedic surgery, as in the rest of medicine, have been formidable. We have worked to incorporate these changes in this edition. There is expanded coverage in this edition of the inevitable complications that all orthopedic surgeons have to deal with, and we have included chapters on geriatric trauma and the psychological aspects of trauma. The other area of orthopedic trauma that is expanding quickly, particularly in the developed countries, is the treatment of osteoporotic (or fragility) fractures. These fractures are assuming a greater medical and political importance, and orthopedic implants are now being designed specifically to treat elderly patients. It is likely that this trend will continue over the next few decades; many of the chapters in this edition reflect this change in emphasis.

The changes in the eighth edition include major changes in its chapter structure. Each of the clinical chapters now follows a specific template beginning with the physical examination, classification, and additional studies used in the diagnosis of each problem. This is followed by a description of the outcome measures used to evaluate patients for the specific injury they sustained. The indications and contraindications for each treatment method, including nonoperative and operative methods are highlighted in tables, as are the technical aspects of the surgeries. Old favorites such as pitfalls and problems are also listed in tables with solutions. Finally, the author’s preferred treatment is now presented in the form of an algorithm, allowing the reader to understand the thought process of the expert writer in deciding on the treatment for the multiple subtypes of injuries described in each chapter. We believe that this will make it easy to get the most out of each chapter.

Finally, we are proud to introduce a new electronic format that should allow for easier access across platforms, a change that is overdue! Video supplementation is also available for the majority of the clinical problems.

We are indebted to the efforts of the experts who have taken the time to share their knowledge and experience with our broad readership and hope that this new edition will contribute to the care of patients.

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### Volume 1

#### SECTION ONE: GENERAL PRINCIPLES

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