Foreword

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The TULUA Technique by Francisco Villegas

"Procedures come alive in the tinkering, fussing hands of their operators, who navigate seemingly insurmountable challenges... What's transmitted to the next generation of surgeons is a process rather than a product, a skill rather than a pill. An apprentice practices the procedure over and over as if taking lessons in an immensely complicated musical instrument; the teacher looks for the sharpness, the fettle that comes with a hundred attempts... Procedures are typically created, nurtured, and perfected in a few hospitals, and they spread as the apprentices gain mastery, move to new places, and promulgate their know-how: see one, do one, teach one."

SIDDHARTHA MUKHERJEE, MD¹

One could sum up Dr. Mukherjee's poetic description of this procedural tinkering in just three words: "Surgical Learning Curve." When a novel surgical technique is first presented, it can easily beguile one into thinking that it is perfected and "ready for prime time"—or at least until the next time you are in the operating room! And we all know how this folly too often ends. For how many times have you been surprised to learn that a surgeon-author had modified or, worse, abandoned their touted technique while you were still in the throes of tackling this same technique's unheralded challenges?

Well, in this impressive tome highlighting Dr. Villegas' TULUA abdominoplasty and its manifold manifestations by other master surgeons, these same seemingly annoying edits actually offer us a valuable window into the creative process of change: where the surgeon instinctively elicits second thoughts about their first thoughts. And these second thoughts about their operative technique are, perforce, usually better than their first and reflect their dogged procedural permutations and efficacious advancements forged on their own journey to "better." 3,4

Or, as author William Deresiewicz has described far more eloquently: "I find for myself that my first thought is never my best thought. My first thought is always someone else's; it's always what I've already heard about the subject, always the conventional wisdom. For our own opinions, seldom swim near the surface," and if I may paraphrase, "and getting to better practices in surgery simply takes time." 5

So instead, any approach's technical steps are more accurately in a constant state of metamorphosis as knowledge, technology, and ability advance. And if we were to string together all of these incremental practice-induced refinements, we would plot their *surgical* learning curve. And, as Steve Jobs articulated so cogently, one can only connect these seminal "dots" of one's past, *after* the fact. And it is this same creative process that has birthed Dr. Villegas's unique TULUA abdominoplasty technique.

But if the story ended there, with Dr. Villegas simply presenting his eponymous technique, we could easily see the book as too anecdotal, too partisan. Instead, to neutralize this all too frequent foible; Dr. Villegas has cleverly deployed a bold modus operandi in the book's formulation—which could indeed be a first in our specialty. For what could be more validating, more credible, more fertile than the editor not only representing their own original technique with earnest transparency but also the experiences of so many of his respected colleagues, as they trimmed the sails of their own journey using the TULUA principles? Invoking my writer's metaphorical license, we could describe this forensic strategy as a case report and meta study rolled up in one!

So, the readers of this text are in for a treat—a veritable feast for our collective eyes and, more potently, our minds. For only with earnest and honest representations of our work can our science truly advance. And thanks to Dr. Villegas, the publication of this tome has done just that.

I am confident that Dr. Villegas and this labour of love that is this book will move all of us along our collective learning curves to ever better abdominoplasty outcomes.

References

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