The history of neurosurgery and the history of the management of head injury are linked inextricably. Head injury was one of the main problems that initially led to surgery on the skull and brain, and one that has long inspired and sustained continued research and improvement. This chapter traces the evolution of critical ideas in head injury.

Prior to the mid-19th century, head injury was regarded very pessimistically. Great advances were made during the First World War. They were driven by asepsis and antisepsis, radiography, anesthesia and the introduction of meticulous surgical technique. During and after the Second World War, additional improvements in technique, accompanied by antibiotics, antiseptics, neurodiagnostics, routine dural closure and cranioplasty led to heightened survival. More recently, the management of head injury has been further advanced by sectional imaging techniques and neurointensive care, including neuromonitoring, neuroprotection, control of intracranial pressure (ICP) and cerebral blood flow (CBF), the understanding of concussion and other forms of traumatic encephalopathy, and finally, a focused emphasis on prevention.

Current emphasis seems to have shifted slightly — not enough, perhaps, to be called a new or different phase quite yet, but enough to warrant mention. The goals of head injury management are no longer a matter survival only, but of both survival and preservation of function.