

Editorial

ANAESTHESIA: DIMENSION, IMPORTANCE AND STATUS

Anaesthesia is a specialized branch of Medical Science and Medical Science itself is a vast subject of wide dimension. So, to provide mankind with proper and improved medical services, branching of Medical Science was a must in the past. Thus Anaesthesia has emerged as a specialized branch of it since 1846 A.D.

Of all the specialities of Medical Science, Anaesthesia deserves and demands an equal, even more importance in comparison with many other branches of Medical Science. A hospital is not a complete hospital without an Operation Theatre (O.T) and as such an O.T. is not an O.T. without an Anaesthesiologist. Surgery can not walk a step without the help of Anaesthesia. Surgeons do admit that surgery has developed much in the last half of the past century only because of that the Anaesthesia has developed tremendously. And this tremendous development in Anaesthesia has become possible through proper pre-operative management, improved per-operative management with monitors like pulsometer, pulse-oxymeter, multimonitor, capnograph etc.

The advanced technique of Regional Anaesthesia with different types of 'Neural Blocks' as well as improvement in the post operative care of the patients have also contributed to the development of Anaesthesia so much.

Not only in the O.T. but also Anaesthesia has extended its domain to the fields of Acute & Chronic Pain Management, Cardiopulmonary Resuscitation (CPR), Intensive Care Unit (ICU), Neonatal Intensive Care Unit (NICU), Palliative Care Medicine and Critical Care Medicine. In the field of Labour pain, Anaesthesia is taking part to produce a painless vaginal delivery avoiding Caesarian Section by continuous Epidural Anaesthesia.

Though these newly developed subjects mentioned above are multidisciplinary in nature, Anaesthesiologists remain in overall charge and play vital role in these situations. So, we can say that the Anaesthesia is not confined now-a-days within

the four walls of O.T. only.

Though it is woeful, it is fact that the importance of this specialized branch of Medical Science is not understood and evaluated properly by the common people of the society. Even our pre-graduate Medical Students keep it at the bottom of their study list. Now it is high time to come forward to make every one — both medical and non-medical understand the importance and vital role played by an Anaesthesiologist in the management of a patient. Now the question is "How to do that?" Even the answer is difficult; we, the Anaesthesiologists, should not sit idle. We can put forward the following suggestions for the improvement of the subject and accordingly steps should be taken.

Pre-operative pre-anaesthesia visit to the patients must be made compulsory both in the Government and Private hospitals and clinics. This visit has both way benefit. It will alleviate the patient's anxiety and tension of operations and anaesthesia. At the same time, the Anaesthesiologists will get the chance to be known to the patients. Anaesthesiologists can also make a plan of Anaesthesia before the schedule of operation. Through the pre-operative visit, there will be a relationship between the patient and Anaesthesiologist. And this relationship is very much essential for proper management of patient.

Like Paediatrics, Psychiatry, Dermatology, Ophthalmology, Otorhinolaryngology. Anaesthesiology must also be incorporated into the syllabus of undergraduate medical education and examinations. In this connection, it can be mentioned that the dimension of Anaesthesia is no less than that of other branches of Medical Science. A 'Code of Medical Practice' should be prepared by the Medical Practitioners. It will guide the conduct, fees and legal aspects of the Medical Practice. This 'Code of Medical Practice' will safeguard the interest of both the patients and physicians.

Fees for Anaesthesiologist should not be fixed on

the basis of fees for the surgeons. Rather fees for Anaesthesia should be judged and fixed by the types and kinds of operation, ASA grading of patients as well as by the duration of Anaesthesia. Thus a 'Code of Medical Practice' can guide the charges for the different modalities of treatment. There should be provision of risk allowance for Anaesthesia practitioners as they are always subjected to tension and hazards of O.T.

We should not feel that the Anaesthesiology is a dependent subject on Surgery. Rather the fact is that the different specialties of Medical Science are interdependent on one another. On this theme Surgery and Anaesthesia are interdependent on each other. So, we should abandon the old idea that

Anaesthesia is a dependent subject.

'Unity is strength' is known to all. So, to justify our deserves and to fulfill our demands a unified effort with unanimous decision should be taken by the members of the society of Anaesthesiologists to establish our dignity, honour and prestige every where.

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