



NEWSLETTER

PAKISTAN SOCIETY OF ANAESTHESIOLOGISTS KARACHI - CHAPTER

Volume 4 :
Issue 03, October 2008

Pakistan Society of Anaesthesiologists Karachi 2008-2009

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Pakistani delegate attended 14th World Congress of Anesthesiologist

14th World Congress of Anesthesiologists was held at Cape Town South Africa from 2nd to 7th March 2008. The conference was opened on Sunday 2nd March with a colorful ceremony and cocktail reception. Besides inaugural speech by president W.F.S.A and chairman organizing Committee W.C.A 2008, there were beautiful folk dances and songs. Scientific programme was held for five days from 3rd to 7th March 2008. Daily there were 10-12 parallel sessions covering full spectrum of anesthesiology which embraced and catered for every anesthesiologist in the world. Few of the topics were Pediatrics, Neurosurgery, Orthopedics, Obstetrics, Military anaesthesia, Office anaesthesia, Basic physiology and pharmacology, Ethics, Literature search, Medical writing Cardiac and ICU.

Besides these lecture session there were poster session and workshops for 4 days from Monday to Thursday. Poster sessions were thematic and gave a chance to see various researches being done all over the world. Various themes were airway, current concepts, history of anaesthesia, ICU, pain, trauma, Orthopedic, Cardiac and lot more.

Workshops were very well organized and helped to sharpen the professional skills. Workshops included Airway-fiberoptic and non fiberoptic, Perioperative echocardiography, Regional anaesthesia, Ultrasound, Eye blocks and most interesting was simulation workshop.

The five day congress was attended by anesthesiologist from all over the world. From Pakistan 19 anaesthesiologist from different institute of Karachi (Aga Khan University, Dow institute of Health Sciences, Jinnah Post Graduate Medical Centre, Liaquat National



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UPCOMING MEETINGS

8th Congress SAARC Association of Anaesthesiologists,
February 5-8, 2009, Karachi Pakistan
www.saarcaa.com

4th Central European Congress of intensive care medicine (CECIM)
October 24-25, 2008 Vienna Austria
www.cecim.at

Biennial National conference,
RSACPCON 2008
November 14-16, 2008
saikatsg@gmail.com

Annual pain medicine meeting & workshops
November 20-23, 2008
California, USA
www.asra.com

62nd Postgraduate Assembly in Anesthesiology December 12-16, 2008,
New York, USA,
www.nyssa-pga.net

5th World congress, World institute of pain (WIP) annual March 8-13, 2009
New York city, USA
www.kenes.com/wip/

41st Annual meeting of the society for obstetric anesthesia & perinatology.
April 29-May 3rd 2009.
Washington, USA
www.soap.org

CME Calendar - 2008 PSA Karachi Chapter

1. 29th November 2008 at Liaquat National Medical College and Hospital 10-12.30 am.

Report : PSA CME Programme Sunday, July 27, 2008

Pakistan Society of Anaesthesiologists hold 2nd annual CME program in collaboration with Department of Anaesthesia, Aga Khan University on Sunday July 27, 2008. The theme of this program was "Blood Transfusion practices." Four didactic lectures on topics of common interest were delivered. Dr. Mansoor highlighted the issues of management issues of unexpected bleeding associated with placenta accreta in an emergency C- Section with limited blood product arrangement. Dr. Naheed Arjumand in her talk focus the anesthetic management

Hospital, National Institute of Cardiovascular diseases and Sindh Institute of Urology and Transplantation) attended the conference. It was a great opportunity to interact with internationally renowned experts and for professional development for all.

Dr. Aziza Hussain, Assistant Professor, Aga Khan University Hospital

Transoesophageal Echocardiography

Perioperative Multiplane TOE was introduced in 1984. It has now become a powerful monitoring technique and diagnostic tool for the management of cardiac surgical patients. Its use is increasing during non-cardiac surgery and in intensive care units. Detailed information can be obtained about the **structure** and **function** of the heart and great vessels. The timely provision of information about the filling status, systolic and diastolic function, the function of the valves and presence and effect of fluid in the pericardial cavity may significantly influence surgical and medical decision making in anaesthesia and in intensive care.

However it can improve patient outcome only if used competently and appropriately. Adopting TOE without formal training can misguide and lead to mismanagement. The American Society of Echocardiography (ASE) established the Council for Intraoperative Echocardiography in 1993 to address issues related to the use of echocardiography in the operating room. In 1997, the Council board created a set of guidelines for performing a comprehensive TOE examination that has been endorsed by the Society of Cardiovascular Anesthesiologists (SCA) Task Force for Certification in Perioperative Transoesophageal Echocardiography.

Guidelines for TOE examination consist of a set of anatomically directed cross-sectional views and standards of nomenclature that provide a framework in which to develop the necessary knowledge and skill in order to promote training, improve quality and completeness of individual studies, and facilitate communication among different centers. Acceptance of this format for performing, acquiring, and archiving intraoperative multiplane TOE examinations will promote a more objective approach to describing the echocardiographic findings that are used to make management decisions and increase the benefit that can be achieved with TOE in the operating room.

The Comprehensive Intraoperative TOE examination consists of a series of 20 cross-sectional views of the heart and great vessels and can be completed in < 10 minutes by an experienced echocardiographer. Every effort should be made to educate cardiac anaesthetists, intensivists, and cardiac surgeons in its proper use through cardiac ultrasound textbooks, review courses and electronic educational media.

Dr. Madiha Hashmi - Consultant Anaesthesiologist. Patel Hospital

Mandatory Bispectral index (BIS) monitoring

Bispectral index (BIS) monitors the depth of anaesthesia and facilitates anaesthetic agent titration^{3,4}. Derived from the data of a patient's electroencephalogram (EEG), the BIS index is a measure of the hypnotic effects of sedatives and anesthetics on the brain which helps the clinicians to monitor and manage the hypnotic state of their patients.

The BIS system includes a sensor, a patient interface cable, a digital signal converter, a BIS engine (microprocessor), and a monitor. The sensor then sends raw EEG information through the cable and converter to the BIS engine. This engine processes the EEG data

according to an algorithm that combines selected EEG features to produce a BIS index which is a number between 0 and 100 that is displayed on the monitor and reflects the patient's level of sedation.

Several clinical^{1,2,3} studies and evidence based work from routine users have shown that use of the BIS to manage anesthesia leads to less drug usage, faster wake-up in the OR, earlier discharge eligibility from the recovery room and higher quality recovery⁴.



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of ITP patient coming for splenectomy. Dr. Robyna mainly highlights the issues of intra-operative blood transfusion reaction & management strategies. Dr. Noor elaborated the important points of anesthetic management for patients presented for urgent orthopedic surgery with uncommon disease hemophilia.

At the end of lectures healthy and productive discussions were generated. Practicing anesthetists shared their practical experience regarding management and limitation of blood product availability.

At the end it was concluded that PSA should continue the CME activities and anesthetists should participate in the local academic activities as it ultimately helps in improving the patient care.

Dr. Mueen Ullah Khan

Associate Professor
Department of Anaesthesia, AKU

8th Annual Pain Symposium & workshop: 20-21 November 2008

The Department of anesthesia, Aga Khan University hospital is holding its 8th Annual Pain Symposium & workshop from November 20-21, 2008. The theme for this year symposium is "**Pain relief: improving quality of life**". The objective of this symposium is to present state of art papers and lectures on pain and its management for all those involved in this field. This covers all specialities as pain is a universal problem & encountered by all those who care for the patients. We are pleased that the invited speakers and delegates not only from Pakistan but also from India, Bangladesh, UK, and Sweden are expected to attend the symposium. The activity will start with Pre symposium workshop including Ultrasound guided regional anesthesia, Epidural under imaging & Interpretation of MRI. This year we are also introducing

" Teleconference" on main day of symposium & Professor Allen Finley from Canada has shown his willingness to participate.

Dr Gauhar Afshan
Chair, organizing Committee
8th annual pain Symposium

For Registration, Contact :

Conference Secretariat

Aga Khan University
P.O. Box 3500, Stadium Road
Karachi 74800, Pakistan
Tel: (92 21) 4930051 Ext: 4578-84
email: conf.sect@aku.edu

The problem with BIS monitoring, is the reliance^{2,4}, as signal artifact from muscle activity, typically from the patient's face or forehead muscles (pain, twitches, seizures, eye movement) and the closeness to medical devices, such as warming blankets, circulatory assist systems, high-frequency ventilators, suction devices, surgical instruments, pacemakers and defibrillators results in a false sense of security about the reduction in the risk of anesthesia awareness.

While BIS monitoring is a valuable tool, its routine use as standard monitoring parameter is controversial³, rather, more emphasis be made on patient selection, the nature and extent of surgery and those at more risk of awareness during anaesthesia keeping in mind that awareness is an uncommon complication of anaesthesia³ affecting only 0.1-0.2% of all surgical patients and awareness occurred even when the BIS values and ETAG (End tidal anesthetic gases) concentrations were within the target ranges⁵

Dr. Wasif Majeed - Senior Anesthetist, Patel Hospital Karachi.

The 8th SAARCAA Congress: Highlights of scientific Program

SAARC nations meet at many forums due to similarities in regional issues. Anaesthesiologists of the region also got together and formed SACA, South Asian Confederation of Anaesthesiologists in 1981, renamed as SAARCAA, SAARC Association of Anaesthesiologists, for reasons of visa facilitation.

SAARCAA is holding its 8th Congress in Karachi Sheraton from the 5th to the 8th Feb 2009. It is the second time around that this congress is being held in Pakistan, the first one being in 1997.

Once again anaesthesiologists of Pakistan are going to play host to South Asian as well as anaesthesiologists from around the globe. A galaxy of speakers from USA, Canada, UK, Ireland, France, Sweden, Australia, Malaysia, Egypt, Iran, Saudia Arabia, South Africa have consented to share their knowledge in the various sessions of the congress. We have had a great response from the South Asian countries especially our neighbouring country India.

Precongress workshops will be held in various hospitals of the city Karachi, from Monday the 2nd of Feb 2009 to Wednesday 4th Feb 2009. A very lavish CME lecture programme has been designed for the 5th Feb (i.e.) Thursday morning when three parallel sessions, one each on anaesthesia, critical care & algology will be held at Karachi Sheraton. Real giants from Pakistan & round the globe will deliver lectures till the afternoon in this CME endeavour. A grand opening ceremony is planned in the evening on the 5th Feb 2009 at the PAF museum where a programme worth remembering is being planned.

Three days of hectic scientific activity will follow Plenary lectures, symposia, invited talks, lectures dedicated to our living legends, a bragging contest with small group discussions on breakfast make the back bone of the scientific programme. World Federation Society of Anaesthesiologists WFSA will also hold a WFSA special symposium on the "Anaesthetists Expertize". The President of WFSA with other office bearers will throw light on this very pertinent issue.

Social programmes and dinners will add colour to the evenings of our guests coming from all over the world. Pakistani hospitality will be at its best!!

We hope to make it worth while for all those who are coming to attend the 8th SAARCAA Congress. Hurry-up, get registered and don't miss out on so much that we have to offer!!!

Professor Saeeda Haider
Chairperson, Scientific Programme Committee, 8th SAARCAA Congress



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POET OF THE MASSES

I write just for pleasure,
to while away my leisure,
I would like to see my odes
sung by people on the roads,

not dumped for good in libraries,
and simply rotting in the books,
never touched by friendly hands,
just craving for human looks,

my song is for the lover,
for the young in heart and soul,
it gives hope to the sufferer,
the lonely and the wayfarer.

Sing my poems all the time,
in rain or snow or shine,
in the moonlit, starry night,
or when the storm is at its height.

Read my poems in the desert,
in the midst of a raging sea,
while you scale the tallest peak,
or go sliding down a tree.

I am a poet of the common man,
who sing my songs in the streets,
only they would appreciate
what appeals to their taste.

Being a poet of the masses,
I am shunned by upper classes,
I only write to entertain,
I don't believe in higher aims.

The topic should be unique,
the rhythm should be fast,
the message should be strong
enough
to touch the soul, break the heart.

Khalid Khan
Consultant
Liaquat National Hospital

The FEEA CME Course

Medical knowledge is rapidly and regularly being updated and the Department of Anaesthesia at the Aga Khan University has a tradition of promoting Continuing Medical Education (CME) on various aspects of Anaesthesia and Intensive Care. In continuation with this effort, we have collaborated with the Foundation for European Education in Anaesthesiology (F.E.E.A). The organization of FEEA is based on a network of regional countries managed by a Course Director & is associated with the European Society of Anaesthesiology (E.S.A.) and the world Federation of Societies of Anaesthesiologists (W.F.S.A.)

The organization provides continuing Medical Education courses worldwide in 90 regional centers to more than 6,000 anaesthesiologists every year. Initially, FEEA aimed at providing continuing medical education (CME) in Anaesthesia for the European Community but over the years FEEA has extended to countries beyond Europe. We are very proud that Aga Khan University, Karachi is the first regional center in Pakistan to get the opportunity for FEEA CME to organize.

The CME program is based upon a cycle of six courses which comprehensively covers the various aspects of anaesthesia, intensive care, emergency medicine and pain management. On the basis of one course per year an anesthesiologist should be able to complete a full cycle of six courses over six years. These courses are designed for the busy clinicians, both in the academic and non-academic institutions.

The first of the six courses was conducted at the Aga Khan University on "Anaesthesia according to patients, type of surgery and modes of organization". The 3-day course consisted of a series of lectures followed by Multiple Choice Questions (MCQs) based on the lectures, panel discussions and workshops. The participants also had the opportunity of discussions with their colleagues and the teachers in a friendly atmosphere. There were two panel discussions on "Total Intravenous Anaesthesia (TIVA)" and "Anaesthesia consultation". The course also incorporated two workshops on "Fiberoptic Bronchoscopy" and "Difficult Airway Management".

The faculty was both local and national and we also had the privilege of having a FEEA representative, Professor Neil Secher as a faculty to the course. The response of the participants was above our expectations as the seats for registered participants were increased from sixty to seventy to accommodate the interested Anaesthesiologists from all over the country. This shows the desire of anaesthetic community in our country to keep up-to-date in their specialty.

PROF. M QAMAR UL HODA, Aga Khan University Hospital