

EDITORIAL

THE ANAESTHETIST: A PERIOPERATIVE PHYSICIAN

Perioperative medicine has been defined as “the continuum of patient care involving preoperative evaluation and preparation, pre-anaesthetic assessment, intraoperative care, and the management of systems and personnel supporting these activities” and the Anaesthetist is said to be a physician trained in anaesthesia and perioperative medicine¹⁻².

The field of anaesthesia has changed over the years when the principal function of an anaesthetist was to render patients unconscious for surgery³. Anaesthetists’ extensive knowledge of physiology and pharmacology coupled with inroads into neuraxial blocks has opened other avenues for anaesthetists to operate^{4,5}. Advances in ultrasonography and x-ray technology have improved and expanded use of neuraxial blocks for management of acute and chronic pain. Anaesthetists are the pacesetters in most pain clinics/therapy units throughout the world. Development of pain medicine have been slow in Ghana and at present Komfo Anokye Teaching Hospital in Kumasi is the only centre which provides routine chronic pain therapy services.

Given their vast knowledge of biochemistry, physiology and medicine, anaesthetists are providing intensive care services in most of the tertiary and some of the regional hospitals in the country. In high income countries, *intensivists* recruited from internal medicine, paediatrics and surgery organise and manage intensive care units. These countries have fellowship programmes for intensive care medicine and qualified doctors manage intensive care units, although some of the fellows may have other roles in their original specialties. Almost all intensive care units in Ghana are currently managed by anaesthetists and their limited numbers must increase if intensive care morbidity and mortality are to reduce. Cardiopulmonary Resuscitation (CPR) is a basic core topic in every aspect of the anaesthetists training programme and CPR training is spearheaded by the Anaesthesia Faculty of the Ghana College of Physicians and Surgeons. Airway maintenance which is important in CPR and the expertise of anaesthetists is unsurprisingly featured in this current issue of the journal.

Anaesthetist-directed preoperative clinics have helped to prepare patients for surgery, reduced cancellation of cases, modified patient drug therapy, discovered other systemic disease and counselled patients when patients were confused or distressed because of scheduled surgery. This may reduce waiting lists in the hospital and help in the efficient management of theatre space and time⁶. Postoperative visits by anaesthetists have been shown to improve

outcome in patients after major surgery and is said to improve on utilisation of resources in hospitals⁷.

Anaesthetists with the co-operation of surgeons, transfusion specialists and laboratory technologists have also championed perioperative blood conservation. Anaesthetists have been involved in preoperative haemoglobin augmentation, promotion of preoperative blood donation, normovolaemic haemodilution and intraoperative/postoperative blood salvage. These reduce the transfusion of allogeneic blood in the perioperative period and save blood for patients in dire need of blood⁸.

There are at present about 23 Fellows in anaesthesia, 10 with Membership and 10 who are Diploma holders in the country. The numbers are certainly not great. However anaesthetists have published articles in most of the last four issues of the Journal, including this issue on various topics thus, showing their versatility^{3,8}. The career opportunities are upbeat and with the current training programmes from the Ghana College of Physicians and the West African College of Surgeons, more doctors are being encouraged into the specialty.

In conclusion, anaesthetists have a major role to play in the management of patients outside the theatre. This role is expected to increase as more physician anaesthetists are trained in the various subspecialties of the profession. Creation of sub-specialisation “Fellowships in Intensive care and Pain” by the Ghana College of Physicians and Surgeons will stimulate the recruitment of more physicians into the specialty.

Ernest Aniteye, FRCA, FWACS, FGCS

Associate Professor in Anaesthesia, University of Ghana Medical School & KorleBu Teaching Hospital, Accra.

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