

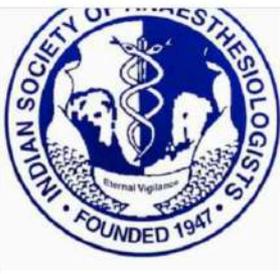


INDIAN SOCIETY OF ANAESTHESIOLOGIST

LUCKNOW CHAPTER



NEWS LETTER



Indian Society of Anaesthesiologists

Lucknow Chapter

Registered Under Society Registration Act

Registration Number: 1-170891/436-2013-2014

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9936565574

Vice President

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8896948383

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16 October 2023:

Newsletter of ISA City Branch, Lucknow

Dear city branch members,

O c t o b e r

That time of the year is finally here, when you can finally smell the festive season in the air ✨🕯️🌕 In the entire circle of the year there are no days so delightful as those of a fine October. We anaesthesiologists kickstart this season with celebrations of World Anaesthesia Day, celebrated worldwide on 16th October. As we look forward to celebrate our festivals with zest and fervour, we send our greetings for the same to everyone. Lets cherish our moments of 2023 until now and embrace the upcoming new year with enthusiasm and hope. With these optimistic words I present the newsletter of October month which covers:

- 1) Welcome message by ISA Lucknow city branch President Dr. P K Das.
- 2) Presenting the festive greetings by ISA Lucknow city branch secretary Dr. Prem Raj.
- 3) The job of an anaesthesiologist is to ensure that the patient is comfortable and unaware throughout the surgical procedure, highlighting this burning aspect in the editorial article “intraoperative awareness”
- 4) World Anaesthesia Day 2023 theme
- 5) Events of the year until now
- 6) Honours and awards
- 7) Tentative upcoming events lined up

WELCOME MESSAGE

Dear ISAIans from Lucknow

It is a proud moment to write the presidential message on behalf of ISA, Lucknow chapter. I wish to take this opportunity to thank all the fellow anaesthesiologists, seniors, colleagues and juniors for showing faith and extending support to me and my entire team.

I joined this city in the year 2006 as senior resident at SGPGIMS and I feel, since then this city's eminent anaesthesiologists have nurtured me to achieve things which i never dreamed of. I really owe a lot to this city and all my well-wishers.

The arena of Anaesthesiologists in this city is filled with extraordinary luminaries. Some names need a mention here: we have Prof Deepak Malviya (Ex President ISA, Ex President SAARC Association of Anaesthesiologist, Ex Director of RMLIMS), VSM Brig. T Prabhakar (Ex ISA President, Ex VC UPUMS, Saifai) . Another great visionary and great Administrator, we have VC UPUMS, Saifai, Ex Director AIIMS, Patna, Prof PK Singh sir. His great nature of helpfulness to known or unknown and always available kind of persona, lets us feel as if he has never been out of this town. Another great academician we have, Prof Anil Agrawal sir, who is like father figure for all of us in the field of Pain Medicine and again another person with no tantrums. Recently we have been enriched by arrival of prof L D Misra. We have Dean SGPGI, Prof SP Ambesh sir, in whose name we have Ambesh T-Trach set for tracheostomy. We have Ex treasurer of ISA Dr Virendra Sharma, who always extend his helping hands to any academic ceremony with no discrimination. Recently we have seen an anaesthesiologist being posted as CMS SGPGIMS, a one of the most gentle person i have ever met, Prof Sanjay Dheeraj. The list will be incomplete without mention of Col. RK Tripathi sir who has probably the best and phenomenal personal library of the city.

If we look at our fellow colleagues in provincial medical services, the list can't be complete without mention of Dr D S Negi who was director of Lohia hospital later reaching to the peak of services to become DG Health.

If we look in the field of our free-lancer fellows, we have Dr Sunil Saxena a great Anaesthesiologist carrying huge experience with him. Here i would wish to name Dr Shishir Agarwal and his team doing great work in academics as well, and these names are few and missing so many due to paucity of space.



By the help of this newsletter, i wish to rebring to kind attention of our senior anaesthesiologists and colleagues to the matter of CCM superspeciality course entrance exam, where course has been modified grossly favouring people from medicine background to this field. If i look at great Intensivists of the nation, i see this field to be predominantly occupied by Anaesthesiologists. I won't be wrong if i say CCM is a branch which was nurtured to grow by anaesthesiologists. But now grown up, it is being given into the hands of physician. A visionary may well see where this branch will be carried to in future with this decision. Apparently it may seem that things are now at an irreversible stage, but i request great Intensivists from Anesthesia background, that it is your nature of never giving up which has made you a phenomenal Intensivist. We Anaesthesiologist are still hopeful that you people will again gather strength and fight for this misjustice.

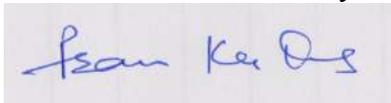
This year we will be honouring Prof D K Singh sir, who has nurtured our society in different capacity , served the administrative responsibility of director RIMS, Ranchi and currently executive director of AIIMS, Bhatinda. We all are thankful to him that he agreed to grace the occasion of Anesthesia Day celebrations and accepted to bless us with Prof Deepak Malviya oration . We all extend our colossive gratitude to him and wish he will continue to bless us for long which we immensely need.

On academic front our team has organised many activities at different places and we expect that we will continue in following years as well.

Present executive members need special mention for their awareness drive for social causes like plantation activities, support to needies like orphanage and super busy sports activities. I expect we will keep the same momentum in coming year.

I always feel we owe a lot to this society and we must think of returning back to it. I personally wish to invite fellow ISAians to come foreword to help needy peoples, make a group of core active members and later involve all of us to do it a large scale. Hope people will come forward for this novel cause.

With best wishes to all of you.



PROF P K DAS

“LONG LIVE ISA”

FESTIVE SEASON GREETINGS

Dear Esteemed Members,

As we celebrate the festive season, I take this opportunity to greet each of you and your families. I also wish to express my sincere gratitude to all the office bearers, past and present, who have worked tirelessly to promote our society



Celebrating a decade of the ISA Lucknow Chapter's existence, in the given period we have achieved significant milestones. We have organized numerous conferences, workshops, and CME programs, providing our members with opportunities to stay up-to-date on the latest advances in the anaesthesiology

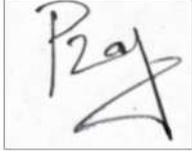
Beyond our educational pursuits, our chapter has involved in many social outreach programs. Our initiatives, from extending support to children's orphanages to endorsing a greener Lucknow through tree plantation drives, speak about our commitment to societal welfare.

As the current secretary of the ISA Lucknow chapter, I am immensely proud and responsible to serve this esteemed organization. The onus is on us to elevate the society even further. With unified efforts and Consistent dedication, I am optimistic about reaching new heights.

As we look ahead to the future, we are committed to building on the strong foundation laid by our predecessors. We will continue to organize high-quality educational events and engage in social responsibility activities

In the end, I'd like to extend my heartfelt gratitude to the executive committee members whose terms are concluding this year: Dr. Farrukh Ansari, Dr. Samiksha Parashar, Dr. Divya Srivastava, and Dr. Amit Tyagi. They have truly been the pillars of our society during their tenure. Additionally, I warmly welcome our new members: Dr. B.N. Singh, Dr. Indu Bala, Dr. Zia Arshad, Dr. Vinod Srivastava, and Dr. Himanshu Prince, who will be serving in various Position within the Lucknow ISA city chapter.

Long Live ISA Lucknow Chapter
Long Live ISA,
Jai Hind

A square box containing a handwritten signature in black ink. The signature appears to be 'Pras' or 'Pras' with a stylized flourish at the end.

Dr.Prem Raj Singh
Secretary
ISA Lucknow Chapter

INTRAOPERATIVE AWARENESS

Editorial article
By Dr. Samiksha Parashar
Editor
ISA Lucknow



In January 1845, a dentist, **Horace Wells** demonstrated the use of nitrous oxide while extracting the tooth of a patient. Although the demonstration did not go well because the patient moaned as if in pain. But when asked later the patient tried to explain that he was not in pain, in fact he didn't remember anything of the procedure.

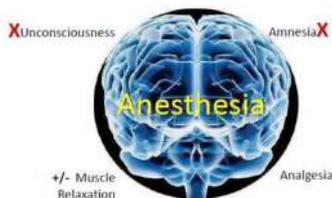
One and a half year later, in October 1846, another dentist **WTG Morton** publically demonstrated the use of ether as an anaesthetic agent. His patient who underwent a tumor operation, was pain free but conscious the entire time. WTG Morton may have said that "*gentleman this is no humbug*", but we can say that the experiment of Horace Well was more successful than that of WTG Morton.



One month after the WTG Morton demonstration, **Dr Oliver Wendell Holmes** said "*The knife is searching for disease, the pulleys are dragging back dislocated limbs, nature herself is working out the primal curse which doomed the tenderest of her creatures to the sharpest of her trials, but the fierce extremity of suffering has been steeped in the waters of forgetfulness, and the deepest furrow in the knotted brow of agony has been smoothed forever*".

And shortly thereafter, Dr. Holmes coined the term anaesthesia. He stated, "*Everybody wants to have a hand in a great discovery. All I will do is to give a hint or two as to names—or the name—to be applied to the state produced and the agent. The state should, I think, be called "Anaesthesia."* This signifies insensibility—more particularly...to objects of touch".

Modern scientists at that time believed that the agony associated with the surgical procedures were over. However, in the third decade of the 21st century, they encountered a new problem: **INTRAOPERATIVE AWARENESS**. Intraoperative awareness haunted the patients equally if not more than the pain related to surgery. What is anaesthesia awareness?



Anaesthesia has certain components: unconsciousness, amnesia, analgesia and with or without muscle relaxation. Whenever there is issue with unconsciousness or amnesia, problem of intraoperative awareness arises. The awareness during anaesthesia is never intentional, thus the term coined was **Accidental Awareness during General Anaesthesia (AAGA)**. AAGA is defined as

Imbalance between depth of anaesthesia & stimulus to which patient is exposed. It is also called as Anaesthesia awareness with recall (AAWR).

As per the 5th National audit project report from Ireland and UK, the incidence of AAGA is summarised below.

Table 6.6. Estimated 'incidences' for reported AAGA arising out of reports to NAP5. The first column shows the number of reports in that category (n) from NAP5 (Poisson confidence intervals are given in square brackets); the second column shows the number in this category in the Activity Survey from the Activity Survey. *includes all login requests to NAP5 (i.e. an artificially inflated estimate); ** includes all Certain/probable and Possible cases, ICU cases, and cases of drug error

	Activity Survey estimate, n	Incidence	%
Incidence of any report of AAGA made by a patient (n=471)* [429-515]	2,766,600	1: 6,500	0.015
Incidence of AAGA Certain/probable (n = 111) [91-133]	2,766,600	1: 25,000	0.004
Incidence of AAGA Certain/probable or Possible (n = 141) [118-166]	2,766,600	1: 19,600	0.005
Incidence of AAGA when NMB used** (n = 155) [131-181]	1,272,700	1: 8,200	0.012
Incidence of AAGA when no NMB used** (n = 11) [5-19]	1,494,000	1:135,900	0.001
Incidence of AAGA reports after sedation by anaesthetists (n = 20) [12-30]	308,800	1: 15,500	0.006
Incidence of AAGA with Caesarean section (n = 12) [6-20]	8,000	1: 670	0.150
Incidence of AAGA in cardiothoracic anaesthesia (n = 8) [3-15]	68,600	1: 8,600	0.012
Incidence of AAGA in paediatric anaesthesia (n = 8) [3-15]	488,500	1: 61,100	0.002

This is just the tip of the iceberg as AAGA is very underreported and the data in the context of Indian population is missing.

CONSEQUENCES

1. To the patient

Intraoperative: Most common

- Sounds and conversation
- Sensation of paralysis
- Anxiety and panic
- Helplessness and powerlessness
- Pain

Less common

- Visual perceptions
- Intubation or tube
- Feelings operation without pain

Postoperative: Temporary effects

- Sleep disturbances
- Nightmares
- Daytime anxiety

Sustained

- Post traumatic stress disorder (most harmful)

2. To anaesthesiologist
 - Medicolegal implications
 - 2% of total claims

WHO IS AT RISK

The mechanism how an anaesthetic acts on brain to produce unconsciousness and amnesia is still unclear. We do not know for sure as who will suffer from intraoperative awareness. The factors leading from complete recall to complete oblivion are unknown, but we can identify the patients at risk:

1. Patient related
 - Women > Men
 - Age < 60 years
 - TIVA > inhalational
 - Long duration of surgery
 - Prior history of Awareness
 - Need for Light anesthesia (Cardiac surgeries, Cesarean section, Surgery in trauma, ASA physical status 4-5, need for premature discontinuation of anesthetic agents)
2. Increased anesthetic requirements
 - Chronic use of benzodiazepines or opioids
 - Alcoholics
 - Severely anxious patients
 - Difficult intubation
3. Improper equipment maintenance or anesthesiologist error
 - Failure to fill vaporisers
 - Judgement errors related to drugs and volatile agents
 - Disconnections and kinks in tubes from the ventilator

PREVENTION OF AWARENESS

1. Preoperative evaluation
 - History
 - Physical examination
 - Identifying patients' risk factors for intraoperative awareness
 - informing high risk patients regarding the possibility of intraoperative awareness.
2. Preinduction of general anesthesia
 - Prophylactic administration of benzodiazepines.
 - Checking the functioning of anesthesia delivery systems
3. Intraoperative interventions
 - Cautionary use of the neuromuscular blocking agents
 - inhalant anesthetics must be monitored with end-tidal gas analyzers and the minimum alveolar concentration (MAC) of anesthetic agents should be maintained > 0.8
 - BIS value < 60
4. Postoperative interventions
 - Postoperative interview to report awareness
 - providing postoperative counseling or psychological support.

MONITORING DEPTH OF ANAESTHESIA

Various monitors are available to determine the depth of anaesthesia. But we must note that the validity of each monitor is questionable and they can act as a guide but cannot prevent awareness with 100% accuracy.

1. Clinical techniques and conventional monitoring (Pulse rate, blood pressure, lacrimation, pupil size)
2. End tidal anaesthetic gas concentration monitoring
3. Bispectral index monitor
4. Entropy monitor
5. Narcotrend
6. Auditory evoked potential monitor

DEALING WITH A PATIENT WITH AWARENESS HISTORY

DEALING WITH A PATIENT WITH AWARENESS COMPLAINT

Prevention: Ten Suggestions

- Check the delivery of anesthetic agents to the patient
- Consider premedicating with amnesics
- Give adequate doses of induction agents
- Avoid muscle paralysis unless it is needed and even then avoid total paralysis
- Supplement N₂O and opioid anesthesia with at least 0.6 MAC of volatile agent
- Administer at least 0.8-1 MAC when volatile agents are used alone
- Use amnesics when light anesthesia is the only regimen which can be tolerated by the patient
- Inform the patient about the possibility of awareness and prevent hearing of operating room sounds
- Teaching and research
- Development of an awareness monitor

Management: Five Memoranda

- Detailed interview with the patient
 - Verify the patient's account
 - Sympathize with the patient
 - Try to explain what happened
 - Reassure the patient about non-repetition in the future
 - Apologize
 - Offer psychological support
- Interview should be recorded in the patient's chart
- Inform the patient's surgeon, nurse and hospital lawyer
- Visit the patient daily during hospital stay and keep in contact by telephone afterwards
- Don't delay referral to a psychologist or psychiatrist

WORLD ANAESTHESIA DAY 2023 THEME



The theme of this year's World Anaesthesia Day, "Anaesthesia and Cancer Care", aims to shine a light on an issue critical to health professionals and patients worldwide.

This year is meant to raise awareness of the vital role that anaesthesia plays in managing cancer and advocating for strengthening anaesthesia services to improve patient outcomes. Patients with cancer will require anaesthesia and surgical care for treatment or palliation. Surgery for cancer is simply not possible unless there is access to safe anaesthesia.

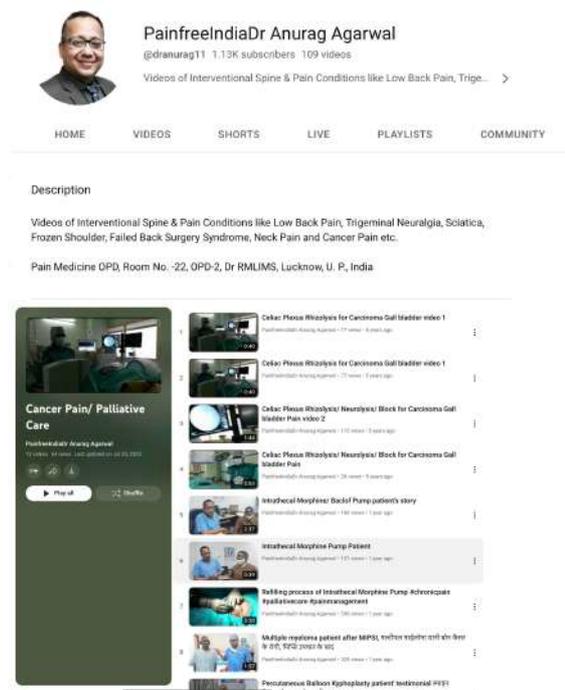
And when surgery is not possible palliative care is of utmost importance.

“One of the worst aspect of cancer pain is that its a constant reminder of the disease and of death.. My dream is for a medication that can relieve my pain while leaving me alert and with no side effects” - Jeanne Stover, 1992

To improve the quality of life for such patients, pain relief of these patients is of great consequence. Anaesthesiologists, as experts in the management of acute and chronic pain, are likely to be involved in the management of patients with cancer pain and those requiring palliative care

“Upto 80% or more cancer patients unfortunately suffer from severe pain. Minimally invasive pain interventions can help most of them in effective relief from pain” : Dr. Anurag Agarwal, secretary, Indian society of Pain Clinicians.

We must ourselves should also be aquatinted that such interventions are both feasible and are performed commonly. As a part of awareness advancement do visit the you tube channel of Dr. Anurag Agarwal, that has the aim of pain free India.



EVENTS OF THE YEAR UNTIL NOW

1. *Golden laryngoscope presentation*

On 9 September 2023, ISA Lucknow chapter successfully conducted the “Golden Laryngoscope Award for the best PG Paper Presentation” at Dr.RMLIMS. Sixteen postgraduate residents (two from each medical college and institute) showcased their original papers. Our heartfelt thanks go out to the esteemed judges: Prof Monica Kohli, Prof Devendra Gupta and Prof. Mamta Harjai. And big Congratulations to the winners: Dr. Somya Tayal (1st position, Dr.RMLIMS), Dr. Shreya Rastogi (2nd position, KGMU), Dr. Nupur Gupta (3rd position, SGPGIMS). Cash prize of Rs.5,000 and certificates to all participants will be awarded during the upcoming event of World Anaesthesia Day celebration.



2. ISA Lucknow City Branch's Outreach program

Marking the occasion of Gandhi Jayanti, Lucknow ISA members brought smiles to a children's orphanage on 3rd October 2023, sharing stationery and delicious treats with the little ones.



ISA
Indian Society of
Anaesthesiologists

ISA Lucknow Chapter's
Social Outreach Program

**Join Us in Making a
Difference!**

Extend a helping hand and
contribute to a brighter future.

Organized by
Executive Committee ISA Lucknow
Chapter

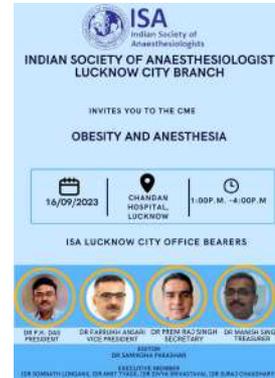
3. *Plantation and walkathon*

It was a productive morning indeed! The Lucknow ISA City Branch organised on 17 September 2023, a tree plantation and walkathon event that witnessed our members' enthusiastic participation. Together, we sowed the seeds for a greener future.



4. CME on Obesity and Anaesthesia

On 16 September 2023, ISA Lucknow chapter organised a CME on Obesity and Anaesthesia at Chandan Hospital. This event's success owes gratitude to the active involvement of our esteemed members and insightful speakers.



TIME	PROGRAM	SPEAKER
1:00-1:10	Welcome Address	
1:10-1:30	Pathophysiology Changes in Obesity	Dr Aparna Shukla
1:30-1:50	Obesity and OSA in Anaesthesia	Dr Mamta Harjai
1:50-2:10	PAC to OT Preoperative Preparation	Dr Shishir Agarwal
2:10-2:30	Pearls to Manage Obese Airway	Dr Ashish Kannaujia
2:30-2:50	Nuts and Bolts of Anaesthesia for Bariatric Surgery	Dr Amitesh Pandey
2:50-3:10	Felicitations and Closing Ceremony	
3:10 Onwards	High Tea and Program Concludes	



5. *ISA UP house inauguration*

ISA UP House (office cum guest house) was inaugurated on 15 August 2023, 4 pm to 6 pm on 77th Independence Day of India by Prof PK Singh, Vice Chancellor, RIMSR, Safai Prof Deepak Malviya, Past President ISA National Prof Brig T Prabhakar, Past President ISA National Prof LD Misra, Past Vice President, ISA National Prof Anil Agarwal, Ex HOD Anaesthesiology, SGPGIMS Dr Virendra Sharma, Ex Treasurer ISA National Dr Bharat Bhusan, GC Member ISA National in August presence of Prof Anil Verma, Prof Apurva Agarwal, Dr Amit Rastogi, Prof Rajeev Dubey & Prof Syed Moeid Ahmed, President ISA UP, Dr Tanmay Tiwari, Treasurer, Dr Divya Srivastava, Dr Prem Raj Singh, Dr Rajneesh Misra from Agra, Dr Bhaskar Sir from Bareilly . Thanks and many congratulations to Members of ISA UP State.



6. CME on Intraoperative Challenges in Pediatric Anaesthesia

On 21 April, 6:30pm, ISA Lucknow chapter organised an online CME on intraoperative challenges in Pediatric Anaesthesia. The overwhelming response of the delegates made it a super success academic event.



7. Cricket match

ISA Lucknow team on 13 May 2023, participated in ISA (UP-UK) Premier League SEASON 2, hosted by ISA Bareilly city branch. Team ISA Lucknow city branch under the leadership of Dr. Rafat won the ISAPL season 2. Many congratulations to the team and the captain of the team, Dr. Rafat.



HONOURS AND AWARDS

ISA Lucknow Chapter was honoured with a Certificate of Appreciation for our medical activity at the #UPISACON 2023 conference in Kanpur!
Thank you for the recognition!



UPCOMING EVENTS

1. WORLD ANAESTHESIA DAY CELEBRATIONS



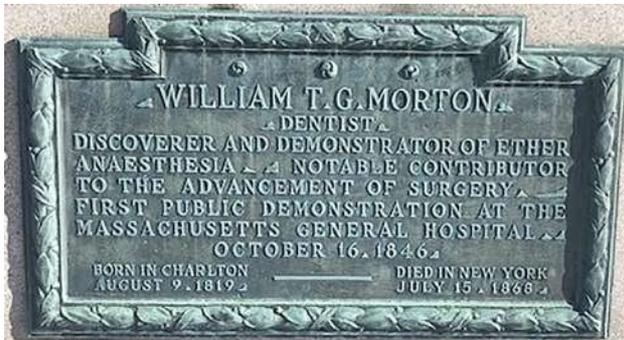
The Executive Committee of ISA Lucknow has organised a programme on World Anesthesia Day Celebration 2023. The program includes an oration/award ceremony, followed by dinner.

2. ART COMPETITION

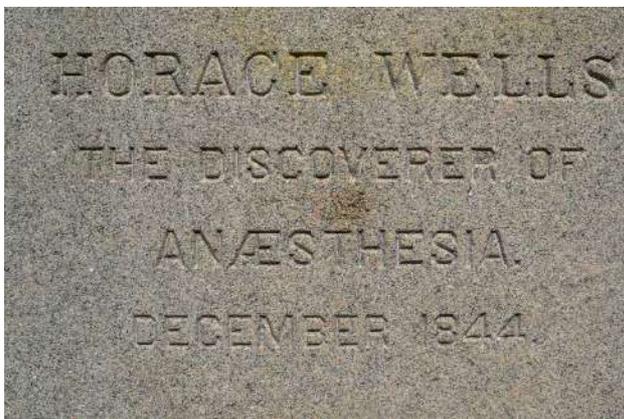


The ISA Lucknow chapter is hosting an art competition themed "AI and Anesthesia", on the occasion of World Anaesthesia Day, providing an excellent opportunity for resident doctors to showcase their artistic talents. The top three winners will be recognized and awarded on World Anesthesia Day, 16th October.

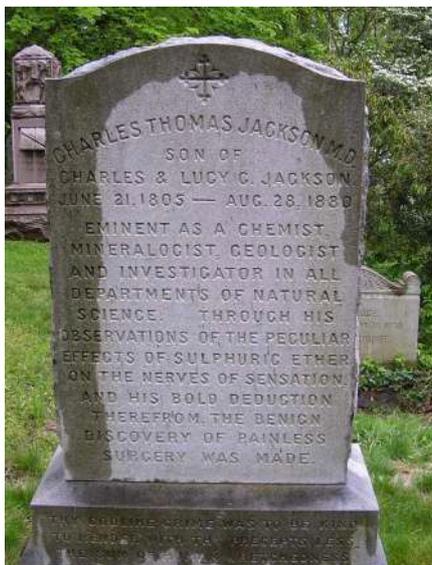
THREE PEOPLE WHO CLAIMED THE DISCOVERY OF ANAESTHESIA



WTG Morton: outraged to read an article in the Atlantic Monthly that credited the invention of etherization to Professor Jackson, so he drove his car furiously on roads, ran to a lake nearby jumped over the fence, fell down and died.



Horace Wells: He became a chloroform addict and committed suicide in his cell by slitting his left femoral artery with a razor after inhaling an analgesic dose of chloroform



Charles T Jackson: He was afflicted with a mental illness and spent the last seven years of his life in an asylum

THANKYOU

And
Happy Festivities

From: ISA Lucknow