



SAARC JOURNAL OF ANAESTHESIA

(Official Bi-Annually Publication of the SAARC Association of Anaesthesiologists)

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Aim : SAARC Journal of Anaesthesia is a common platform for sharing the knowledge related to the sciences of Anaesthesia, Critical Care, Pain management and the related Health Science Education, amongst the Anaesthesiologists of SAARC nations and also with the Anaesthesiologists of other nations of the globe.

The journal publishes original articles, reviews, research findings, experiences in the field, case studies, debates, news and views on the related fields and other articles of interest to the anaesthesiologists.

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SOUTH ASIAN ASSOCIATION FOR REGIONAL CO-OPERATION (SAARC)



SAARC was established when its charter was formally adopted in the year 1985 by the seven heads of state or Government of Bangladesh, Bhutan, India, Maldives, Nepal, Pakistan, and Srilanka; to provide platform for the people of South Asia to work together in a spirit of friendship, trust and understanding, to accelerate the process of economic and social development in member states. Afghanistan became its eighth member in the year 2007 and two other nations viz Peoples Republic of China and Islamic Republic of Iran are keen on joining SAARC. All the countries have agreed on five areas of Co-operation:

- Agriculture and Rural Development
- Telecommunications, Science, Technology and Meteorology
- Health and Population Activities
- Transport
- Human resources Development.

Apart from membership for the eight countries, observership is granted for Peoples Republic of China, European Union, Islamic Republic of Iran, Japan, Republic of Korea and USA.



SAARC ASSOCIATION OF ANAESTHESIOLOGISTS (SAARC-AA)

[Formerly known as South Asian Confederation of Anaesthesiologists (SACA)]

SAARC-AA (formerly SACA) was founded in the year 1991 and the vision of the founders was based on the ancient links, contemporary needs and the future potential existed amongst the Anaesthesiologists of SAARC nations.

The primary objectives was to bring together the anaesthesiologists of seven SAARC nations who share common problems/challenges in their profession and secondly to facilitate them to share their knowledge and expertise under one roof there by to find our common solutions to the common problems. Till today seven congresses have been held once in two years in different SAARC nations and eighth viz. 8th congress has been scheduled to be held on 5-8, Feb 2009 at Karachi, Pakistan.

Insignia of the Emblem :

The emblem reflects the united SAARC nations inside one circle with no individual national boundaries. The logo also signifies the ancient links those existed amongst all SAARC nations, identical and contemporary present day needs and future unified potential

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SAARC Association of Anaesthesiologists

5th – 8th Feb. 2009

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SAARC ASSOCIATION OF ANAESTHESIOLOGISTS (SAARC-AA)

(Formerly known as South Asian Confederation of Anaesthesiologists - SACA)

Kathmandu, Nepal



MESSAGE

Prof. (Dr.) Gautam Ratna Bajracharya
President, SACA, Kathmandu, Nepal

Sept., 22nd 2007

It is my immense pleasure that SACA executive committee meeting held in 7th SACA congress 2007 on 24th February 2007 at Hotel Hyatt Regency, Kathmandu, Nepal decided to publish “**SAARC Journal of Anaesthesia**”. The executive have rightly decided to give the responsibility to not less than Prof. (Dr.) P.F. Kotur, Registrar KLE University, J. N. Medical College, Belgaum, Karnataka, with the immense experience in the field of publication as editor of Indian Journal of Anaesthesia.

Now the time has come to see the dedication of Prof. (Dr.) P.K. Kotur with this publication in our hand. The right decision of the editor to release the first issue of SAARC journal of Anaesthesia on “World Anaesthesia Day” – 16th October 2007 has got its own significance along with the celebration of the day by releasing by all the member SAARC countries through teleconference / internet.

The spirit of SAARC have been well taken up especially in our 7th SACA Congress 2007 by having the full quorum of attendance of all the 7 countries of SAARC, namely Bangladesh, Bhutan, India, Maldives, Nepal, Pakistan and Srilanka. We expect to have participation from Afganistan in the 8th Congress to be held at Pakistan.

As the congress president of 7th SACA Congress 2007, I take this opportunity to thank all the delegates and participants, different companies and all the well wishers for the full cooperation extended to us in making our congress a grand success.

I also like to request in the capacity of President of SACA to all the member countries to participate in the bigger way in the 8th congress to be held at Pakistan. I invite all the regular participants of SACA congress from the International forum to participate in 8th congress.

Last but not the least I would like to request WFSA to support the journal whole heartedly in the development of Anaesthetic activities in the SAARC region.

A proposal for rename of SACA was endorsed in the Executive Committee meeting, as a resolution was filed by some of the members in the meeting held on 24th Feb. 2007. The above agenda was discussed and it was resolved to rename the association as :

‘SAARC Association of Anaesthesiologists, - SAARC – AA’

as there were some administrative and technical difficulties with the original name.

(Dr. Gautam Ratna Bajracharya)



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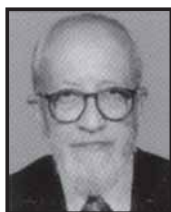
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MESSAGE

Prof.S.N. Samad Choudhury
 President, Bangladesh Society of Anaesthesiologists.

South Asian Confederation of Anaesthesiologists was established in the year 1991. Since then seven congresses have been held at Dhaka, Bangladesh-1993, Colombo, SriLanka -1995, Karachi Pakistan-1997, Chennai India-1999, Dhaka Bangladesh-2001, Colombo SriLanka-2003 and Kathmandu Nepal-2007. Two decisions were taken in Kathmandu:- i) The name SACA (South Asian Confederation of Anaesthesiologists) be replaced by SAARC-AA (South Asian Association of Regional Cooperation-Association of Anaesthesia) and ii) To publish a journal of SAARC-AA. Prof. P.F.Kotur, President, Indian Society of Anaesthesiology, has been selected as the Editor of the Journal. His active interest and efforts have made it possible to publish the first issue of the journal on the 16th October, 2007. The selection of 16th October, the day of official demonstration of "Ether Anaesthesia" in 1846 is very appropriate for the publication SAARC-AA Journal.

The publication of the journal is a step forward to mark the activities of South Asian Association of Regional Cooperation- Association of Anaesthesia (SAARC-AA). I wish the success of SAARC-AA in future.

BRIEF HISTORY OF BANGLADESH SOCIETY OF ANAESTHESIOLOGISTS

Bangladesh Society of Anesthesiologists (BSA) was formed in 1974. Our journey began in 31 December, 1978 through first national conference held on the same year. Our society conducted 24 (twenty four) conference until its inception. The society now has reached its youth. However, the long journey was not very comfortable for it. The scope of the society has expanded by this time. As a result the society has become member of the World Federation of the Societies of Anesthesiologists in the year 1987. South Asian confederation of Anesthesiologist (SACA) was formed in 31 December 1991 in new Delhi and the first congress of SACA was held at Dhaka in October 27-29, 1993 with initiation and sponsorship of BSA. There were only 6 (six) postgraduate anesthesiologist in the society during its inception. By this time, our society has produced about 300 postgraduate anesthesiologists engaged in their profession at home and abroad and acquired name and fame in their respective fields of work. The existing number of the members of the society is now about 600.

It can be said certainly with emphasis that the anesthesiologists of our country are not lagging behind in terms of safety, quality and standard in comparison with those of the developed word. Now a days complicated surgical procedures like cardiac surgery, neurosurgery, thoracic surgery, kidney transplant, pain management and intensive care of patients have been possible due to improvement of anesthesiology. Bangladesh society for study of pain has been formed to give a scientific basis of pain management which was initiated by the anesthesiologist of BSA. The aim of BSA is to provide peri-operative care of patients, pain management, intensive care of patients in ICU, manpower development through various courses like FCPS, MD, Diploma and MCPS and other academic activities like journal publication and conducting scientific seminars and symposium and encouraging the society member for participation in scientific sessions at home and abroad. Recently the society has organised workshop and hand on training with the active collaboration of WFSA and experts from India on Neuro-anaesthesia and Paediatric anaesthesia. Still we are lacking some basic infrastructural problem like proper placement and distribution of manpower, availability of equipments and drugs at all levels of health care delivery system, which is a pre requisite for the effective and fruitful outcome. However we are very much hopeful and awaiting a golden future.

- Prof. S. N. Samad Choudhary



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INDIAN SOCIETY OF ANAESTHESIOLOGISTS

EMBLEM & FLAG - THE INSIGNIA



The emblem was designed by Dr. Badola from Lucknow. The design was accepted in 1964 and has been used as the logo since then. The emblem signifies “The patient’s safety through unconsciousness” steered by anaesthesiologists represented as mythical mermaids who have human intelligence and the skill of dolphin in swimming. The waves represent unexpected emergencies, that arise in anaesthesia practice. The dark and light shades represent the sleep and awake states. The mission commitment of the society is described as ‘Eternal Vigilance’ whether day or night further symbolising with alternate shades. The serpents and rod represent the medical profession in which Anaesthesiology is broad based.



MESSAGE

Dr. P. F. Kotur

President, Indian Society of Anaesthesiologists

It is high time for all the Anaesthesiologists of SAARC region to work unitedly, discuss, debate and resolve the common problems faced by the Anaesthesia community, for our mutual benefits and also for the progress. SAARC - AA is a wonderful platform for this purpose.

Indian Society of Anaesthesiologists being in the elder brother’s position amongst SAARC nations, realising the associated responsibility, has gracefully accepted with the honour the responsibility ontrusted by other younger brother membes of SAARC - AA of bringing out the SAARC journal of Anaesthetic the official publication of SAARC - AA. Certainly it is a great mile stone for all of us; in the accomplishment of goals of SAARC - AA.

(Dr. P. F. Kotur)



SOCIETY OF ANAESTHESIOLOGISTS OF NEPAL

(Member of The World Federation of Societies of Anaesthesiologists)



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Message

It gives me a great pleasure to know that SACA is launching first issue of SAARC journal of Anesthesia on the auspicious occasion of "World Anesthesia Day" on 16th October 2007. This will be one step ahead in exchanging ideas within the members of SACA. Anesthetic problems of SAARC nations are different than the problems seen in other parts of the world. I hope the article published in this journal will highlight the problems of this region.

I am sure this journal will be of high quality and will be recognized not only in this region, but internationally also.

On behalf of all the members of the Society of Anesthesiologist of Nepal (SAN). I wish this journal a grand success.

Prof. B D Jha
President





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Insignia of the Logo



The logo is self explanatory :

- Signifies the essential tools of an anaesthesiologist
- Face Mask
- Laryngoscope
- The foundation stone of our specialty – Let there be no pain
- The Staff of Asclepius – the symbol of the God of healing, with his serpent entwined staff



MESSAGE

Prof. Akhtar Aziz Khan
President, Pakistan Society of Anaesthesiologists

The pleasure I feel while writing the following words is unprecedented and boundless: 2008 sees the launch of SAARC's first ever Journal of Anaesthesia. Truly a manifestation of how far this specialty has progressed over the past few decades in the SAARC countries, this journal is a literary landmark of years of cumulative research and clinical practice in anaesthesia. This journal will not only aid fresh and upcoming doctors in the field by providing a multitude of experience from previous practitioners, but will be vital to the growth of seasoned doctors already veterans in the domain, by keeping them abreast of the latest in research and clinical trends. I am sure it will prove to be a staple in every anaesthesiologist's library.

BRIEF HISTORY OF PAKISTAN SOCIETY OF ANAESTHESIOLOGISTS

Dr. Habib-ul-Haq Siddiqui did not found the Pakistan Society of Anaesthesiologists without a fair number of false starts preceding its final naissance. The seeds of its origin had been germinating since 1955 to no avail, but along with the zeal and determination of 12 other eminent professionals in the field, those seeds bore fruition on 13th March 1971. The premise of the society was clear and simple: 'To advance the science and art of anaesthesia in Pakistan, and to enhance the professional, economic, and social status of Anaesthesiologists, and to seek cordial relations between the members and other groups of scientific workers both in, and outside Pakistan.' - *Taken from the 1st resolution passed by the PSA in 1971.*

This effort succeeded where others had failed, due to keen foresight and conscious attempts by these individuals, to make the running of the society as free of personal agendas, and as efficient as possible. It is a tribute to this same exhibition of efficiency, which has lead PSA to attain the distinction of being the oldest professional society in Pakistan, second only to the Pakistan Medical Association. To this day, it has upheld the tradition of holding a monthly meeting at PMA House for all of its members, a custom unbroken in its 36 years of existence, and in 2005, it celebrated its silver jubilee for holding 25 consecutive years worth of annual conferences.

During the course of these past few decades, the itinerary of the PSA has highlighted and made key advancements by encouraging young doctors to join the specialty, and in several other areas, from the training of anaesthesia technicians, to improving their facilities in various clinics and hospitals around Pakistan. Perhaps the most significant breakthrough made by founding members of PSA, was their achievement in having Anaesthesia Departments recognized as Teaching Units, with posts according to academic qualifications. This proved to be a legitimizing stamp of acknowledgement that was immensely welcome to the association that strived so arduously to materialize.

Today, I'd like to pay homage to the Society that has refused to stay dormant for any period of time in 36 years, which has ensured its commitment to dynamism by holding regular workshops, seminars, and conferences, and which is hence as active today as it ever was....if not even more so.

- Dr. S. Tipu Sultan
- Dr. Akhar Aziz Khan



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COLLEGE OF ANAESTHESIOLOGISTS OF SRI LANKA



MESSAGE

Dr. Carmeline Fernando
President, College of Anaesthesiologists
Sri Lanka

It is a great privilege and pleasure for me to send this message on behalf of the College of Anaesthesiologists of Sri Lanka, on the historic occasion of the launch of the SACA journal.

Undoubtedly, this step will draw closer the ties that bind the countries of the South Asian region. It will not only provide the opportunity for exchange of views on anaesthetic practice and education, but also highlight the common problems shared by the countries in our region.

I am confident that the journal will maintain the high academic standard that the SACA Congress has attained over the years. I congratulate Prof. Kotur and the Editorial Board for a job well done.



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EDITORIAL

Dear Readers,

‘Wish you all a bright and prosperous new year - 2008’

The idea of starting SAARC Journal of Anaesthesia was conceived during the 7th SACA Congress held at Kathmandu, Nepal in Feb, 2007 in order to consolidate and share the professional/scientific ideas of Anaesthesiologists of SAARC nations. The journal got symbolically inaugurated on the eve of the World Anaesthesia Day celebrations on 16th October 2007, at the gracious hands of Prof.(Dr.) Vasumati Divekar, Founder President of SACA at Belgaum. India and it will be an official publication of SAARC-AA

As a founder editor, it is my foremost duty to thank all the member SAARC nations especially the members of advisory committee for showing confidence in me and giving me an opportunity to serve the association. I, indeed consider it an honour and a privilege to function as the editor of the journal for next four years i.e. upto 2010.

I must confess that it has been a Herculean task for me to gather all the raw materials including finances for this maiden issue, from seven distinct and distant sources. I am proud that I am successful though, partly. Now, the foundation stone is laid down for the journal and it must roll down further. I don't have slightest doubt that all the member societies will co-operate, contribute and nurture this 'New born' to grow, by active involvement of all the members.

This issue, though contains heterogenous articles from member nations, they reflect the clinical encounters commonly faced by the anaesthesiologists of the region and the solutions to the clinical problems applicable everywhere in the region.

In the present era, of Evidence Based Medicine (EBM) by virtue of his new role as perioperative physician, the anaesthesiologist has to shoulder the additional responsibility of assuming the leadership in the practice of EBM, as he functions as the ringmaster in the entire process of surgical treatment of every ailment, of which the patient considers himself or herself as partner in the treatment process.

Anaesthesiologist has to be on the toes, updated always, not only in the anaesthesia knowledge but also in the surgical knowledge of the treatment process, that is being offered to the patient.

The paradigm of EBM itself advocates that evidence is never static but is always dynamic (what is true and best today may not be so tomorrow) and the same thing applies to evidences cited about EBM also. This issue has two articles on EBM, one describing the accepted practices and the other narrating the changing trends in the principles and practice of EBM.

Lastly, we all know that feedback on any endeavour is quite essential for future improvisation and journal publication is not an exception.

I am open for all constructive criticisms, suggestions for the improvisation of this esteemed journal of ours.

Dr. P. F. Kotur
Editor

THE SACA SAGA

V.M. Divekar
Founder President (SACA)

It was in September 1986, while attending an ASEAN congress in Singapore, it struck me that the rest of the 'Anaesthesia World' is in groups except the South Asians. I spotted Dr. Samad Choudhary of Bangladesh at the other end of the auditorium; we got together and planned for the confederation of South Asian countries to come together under one umbrella as member countries viz India, Pakistan Bangladesh, Nepal, Srilanka, Bhutan, Maldives and (Afghanistan?). In the same year at the Asian Australasian congress at Hong Kong, a formal meeting was held with the then President of World Federation. The world body viz World Federation of Societies of Anaesthesiologists approved the idea encouragingly. At the world congress in Washington in 1988, we had a mega –get together of the South Asians attending the conference to convince the member countries on the need for such an association.

In 1991, thanks to Dr. H.B.Kaul of AIIMS New Delhi, we had a formal and official formation of the South Asian Section of WFSA in the presence of Dr. Kester Brown, the then secretary of WFSA at the Indo-British Anaesthesia meet in New Delhi.

The following members were present Dr. Samad Choudhary, Dr. Khan (Bangladesh), Dr. Deepthi Attygalle, Dr. Nalini Rodrigo (Sri Lanka), Dr. Roshan Amatya, Dr. Bajracharya (Nepal) Dr Fauzia Khan Dr Rehana Kamal (Pakistan), Dr. Mrs. Divekar, Dr. H. B. Kaul, Dr. Abhijit Bhattacharya, India and a representative of Bhutan.

The association was named as the South Asian Confederation of Anaesthesiologists (SACA). Dr. (Mrs) V. M. Divekar was elected as founder President of SACA unanimously and Dr. Abhijit Bhattacharya as Hon. Secretary. Dr. T. S. Jayalakshmi and Dr Rashmi Madan were elected as Finance Secretary and General Secretary respectively of the South Asian Confederation of Anaesthesiologists.

It was decided to have the conference once in two years.

Dr. Samad Choudhary of Bangladesh organized the first SACA Congress in September 1993 at Dhakha. It was a memorable and historical meeting because for the first time the South Asian Anaesthesiologists met under our own banner and a logo. Begum Khalida Zia the Prime Minister of Bangladesh inaugurated the conference.

Subsequent Conferences were held at Colombo (1995), Karachi (1997) Chennai (1999), Dhaka (2003), Colombo (2005) and Katmandu (2007).

The 7th SACA congress which was held at Kathamandu Nepal in Feb 2007 was unique in many respects. It was not only attended in large numbers but also by the representatives from all member SAARC nations. The main highlight of the congress was the presentations on–Anaesthesia challenges-



Birth of SACA

faced by each member countries, made by respective national Presidents.

For the first time, Dr Gautam Bajracharya presented the draft of the constitution of SACA. In view of the difficulties faced by many members, while participating in the SACA Congresses, in the procurement of visas of host countries, it was proposed to change the name from South Asian Confederation of Anaesthesiologists (SACA) to South Asian Association for Regional Co-operation (SAARC)-Association of Anaesthesiologists (SAARC-AA) as the name SAARC is accepted across the globe, in all the international fora.

The need to have an official publication of the SAARC-AA was also identified and it was resolved to establish and bring out SAARC Journal of Anaesthesia. The efforts putforth in this regard by Dr. Tipu Sultan (Pakistan), Dr. Khalill Rehman (Bangladesh), Dr Swinithi Ranasinghe (Srilanka), Dr. Gautam Bajracharya (Nepal) and Dr P.F.Kotur (India) must be acknowledged. Dr. P.F.Kotur was selected as the Founder Editor of SAARC-Journal of Anaesthesia and all the member nations agreed to contribute not only the scientific articles, but also seed amount along with advertisements from respective nations.

All the member nations responded favourably and with untiring efforts of Dr. P.F.Kotur, the journal got released symbolically through video conferencing of the member nations on the eve of World Anaesthesia Day Celebrations on 16th October 2007. I was fortunate enough to travel to Belgaum to inaugurate the same. I am sure the journal will cater to all the needs of Anaesthesiologists of the region and will become one of the internationally acclaimed journals in the future.



Birth of SAARC Journal

This is a dream come true for me, SACA is now 16 years old and going strong. The journal proposed by Dr. Kotur is another milestone.

I wish SACA and the journal all success.

BACKGROUND OF FORMATION OF SACA

(Now SAARC Association of Anaesthesiologists)

Prof. S.N.Samad Choudhury
 Founder President-Elect &
 President, First SACA Congress.

It was in September, 1987 after the successful 5th ASEAN Congress at Singapore, there was a discussion between Prof. V.M.Divekar of India and Prof. S.N.Samad Choudhury of Bangladesh on the necessity of forming a forum of the Anaesthesiologists of the South Asian Countries. In that discussion it was decided that a meeting of the Societies of Anaesthesiologists of the region would be convened in future on that matter.

During the 9th World Congress of Anaesthesiologists in Washington D.C. USA held in May, 1988, a joint meeting was convened. The meeting took place on May 26 in which delegates from Bangladesh, India and Pakistan were present. The members present were Prof. S.N.Samad Choudhury and Dr. A.B.Siddique from Bangladesh; Prof. V.M.Divekar, Prof. I.D.Panchal, Dr. A.P.Agashe, Dr. V.K.Appukutty, Dr. V.H.Bhagatwala, Dr. S.A.Bhagwat, Dr. (Mrs.) S.S.Bhojraj, Dr. P.M.Chikalpatty, Dr. N.Damle, Dr. B.G.Gharpure, Dr. P.Kataria, Dr. A.Mandke, Dr. P.Mavinkurve, Dr. Pritam Singh, Dr. Falguni Shah and Dr. N.P.Singh from India and Prof. S.Tipu Sultan, Dr. N.Jakhrani, Dr. Rehana S.Kamal, Dr. S. Kamal, Prof. A.Saki, Dr. Razia, Dr. F.A.Khan, Dr. I.Lohani, Dr. S.Abbas and Dr. H.A.Qureshi from Pakistan. After a lively discussion it was unanimously agreed that a forum of the Anaesthesiologists would be formed and it may be named as "South East Asian Regional Cooperation in Anaesthesia (SEARCA). The countries which may join the forum were Afghanistan, Bangladesh, Bhutan, India, Myanmar, The Maldives, Nepal, Pakistan and Sri Lanka.

After a lapse more than two years, the next meeting took place in September, 1990, during

the 8th Asian-Australasian Congress of Anaesthesiologists held in Seoul, DPR Korea. The meeting was attended by the representatives from Bangladesh, India, Nepal, Pakistan and Sri Lanka. The representatives included Prof. S.N.Samad Choudhury from Bangladesh; Prof. V.M.Divekar, Prof. Abijit Bhattacharya, Prof. H.L.Kaul from India; Prof. R.Amataya from Nepal; Prof. Rehana S.Kamal and Dr. Fauzia A. Khan from Pakistan and Deepti Attygalle from Sri Lanka. Besides, Dr. Say Wan Lim, Secretary, WFSA, Dr. T.C.K.Brown, Chairman, Education Committee, WFSA and Dr. R.M. Hare, Secretary, AARS were present. Their suggestions were helpful. The outcome of the meeting was very encouraging. It was finally decided to form a Confederation of Anaesthesiologists of South Asian Countries preferably during the Workshop which would be organized in Madras or some other place in India under the sponsorship of WFSA in 1991. Two important decisions were taken in New Delhi, India during the International Congress of Anaesthesiology, at All India Medical Institute from November 30 to December 3, 1991 at the initiatives of Prof. A.M.Deshpande and Prof. H.L.Kaul. Representatives from Bangladesh, Bhutan, India, Nepal, Pakistan and Sri Lanka attended the meeting. After a series of discussions, it was decided on 1st December, 1991 that:-

(A) the confederation be named as "South Asian Confederation of Anaesthesiologists (SACA)" replacing "South East Asian Regional Cooperation in Anaesthesia (SEARCA)",

(B) an Adhoc Committee was formed with the followings: President: Prof. V.M.Divekar, President-Elect: Prof. S.N.Samad Choudhury,

Secretary: Prof. A.Bhattacharya, Assistant Secretary: Dr. R.Madan, Treasurer: Dr. T.S.Jayalakshi, one Vice-President and one member from each country.

Prof. A.Bhattacharya, Secretary of the newly formed SACA, was given the responsibility of drafting a constitution of SACA and distributing it to member societies. Bangladesh Society of Anaesthesiologists was offered to host the first Congress of SACA in Dhaka, Bangladesh from October 27-29, 1993.

The draft constitution of SACA was circulated to the member countries prior to the 10th WCA at the Hague, the Netherlands, from June 12-19, 1992.

An extended meeting of the EC of SACA was held on June 17, 1992 at the Hague Congress centre. Dr. R.M.Hare attended the meeting as a special invitee. The meeting approved the provisional draft constitution after a number of amendments. The meeting also discussed the organizational, financial and other aspects of SACA. The meeting confirmed the date of the first SACA Congress from October 27-29, 1993 with a pre-congress refresher's course on the preceding day. Prof. S.N.Samad Choudhury, President-Elect of SACA and President of Bangladesh Society of Anaesthesiologists (BSA) were nominated as the President of the first SACA Congress.

The Board meeting of AARS of WFSA held at the congress centre at the Hague, the Netherlands on June 15, 1992 congratulated the creation of SACA and decided to support financially the first SACA Congress in the form of organizing a Refresher's

course on October 26, 1993. Dr. M.V.Silao, Chairman, Prof. J.H.Lee, Vice-chairman, Dr. R.M.Hare, Secretary, Prof. R.Ogawa, Treasurer, Prof.S.N. Samad Choudhury, Board-Member, AARS, Dr. Say Wan Lim, President WFSA, Dr. C.Hoskins, Vice-President, WFSA, Prof. K.Mori, Member, EC, WFSA, Dr. T.C.K.Brown Vice-Chairman, WFSA and Prof. M.Fujimori, Chairman, Education Committee of WFSA and AARS were also present at the meeting. Dr. Say Wan Lim, President, WFSA, Dr. T.C.K.Brown, Vice-President, WFSA, Prof. M.Fujimori, Chairman, Education Committee, WFSA and AARS, Dr. M.V.Silao, Chairman, AARS, Dr. R.M.Hare, Secretary, AARS and many others attended the first SACA Congress held at Dhaka, Bangladesh.

The 2nd SACA congress was held at Colombo, Congress President was Dr. D. Attegalle. The 3rd Congress at Karachi, Congress President was Prof. Tipu Sultan, 4th Congress was held at Chennai, Congress President was Dr. Balakrishnan, 5th congress was held at Dhaka, Bangladesh, Congress President was Prof. M.Khalilur Rahman and 6th Congress was held at Colombo, Congress President was Dr. S.Ranashinge and 7th Congress was held at Kathmandu, Nepal, Congress President was Dr. Bajracharya. Next congress will be held in Pakistan.

The "South Asian Confederation of Anaesthesiologists (SACA)" is renamed as "SAARC Association of Anaesthesiologists (SAARC-AA)" at the Kathmandu Congress held in February, 2007.

SACA – AS I KNOW

Dr. K. Balakrishnan
Past President SACA
Past President ISA

South Asian Confederation of Anaesthesiologists was formed in the year 1991, being the brain child of Prof. Kester Brown, the then Secretary of the World Federation of Anaesthesiologists. He suggested to the attending delegates of the South Asian Region at Seoul, South Korea during the Asian Australasian Congress, to form a confederation like that of AASIAN countries and conduct periodic meetings. The first President of the SACA namely, Prof. Vasumathi Divekar of Mumbai was elected to lead the members of the South Asian Region namely Bangladesh, Pakistan, India, Sri Lanka, Nepal, Maldives and Bhutan.

The decision to hold the first SACA meet was decided and it was allotted to Bangladesh. The first SACA was successfully conducted at Dakha in 1993 under the leadership of Prof. Samad Choudry the father figure of Bangladesh anaesthesia society.

The first SACA flag was designed after consulting the other SACA member countries, which showed the International boundaries of all the SAARC countries. The aims and objectives of formation of SACA are:

- To promote closer ties among the South Asian National Societies
- To organize regular meeting with SAARC country Anaesthesiologists to exchange views, information and experiences.
- To help to elevate the standards of training and practice of Anaesthesiology and critical care in South Asian countries.
- To set standards of safety in both training and equipment
- To encourage exchange of expertise.

- For exchange of technical know-how and to get the industries to exhibit their products in neighboring countries.

These type of congregations are always a great inspiration to our junior colleagues and contribute enormously to the uplift of Anaesthesia speciality. SACA congress is being organized once in two years in rotation, SACA gives a sense of belonging and participation to the Anaesthesiologists of our region. Exchange of global trends and recent advancements are propagated this way, which helps us in our stride to provide better care to our patients.

The 2nd SACA congress was conducted in a grand manner at Colombo in Sri Lanka in 1995 under the leadership of Prof. Deepti Attygalle. The 3rd SACA was conducted with all the enthusiasm by Prof. Tipu Sultan at Karachi in Pakistan. That gave an opportunity for the Indian delegate anaesthesia to visit Pakistan and enjoy the hospitality of Pakistan friends.

The next in rotation to conduct the 4th SACA congress was for Nepal. Since the Nepal society expressed their inability to organize the SACA it was then India was given the responsibility to hold the 4th SACA congress and Dr K. Balakrishnan was chosen as the President to organize 4th SACA conference.

The Indian Society of Anaesthesiology members at their annual general body meeting objected to the SACA flag showing KASHMIR as part of Pakistan. This matter was amicably settled after the elected SACA President contacted and got the approval of acceptance from all member countries to change the flag. Again Prof. Kester Brown then the President of WFSA came forward and suggested to have

regional boundary instead of international boundaries which was being objected in the SACA flag. This was accepted by all including the members of ISA.

Chennai was chosen for the 4th SACA congress and large number of anaesthesia from all countries numbering about 2000 attended the meeting. As accepted all the post graduate trainees from SAARC countries were treated as guest delegates, free of registration, accommodation charges and other hospitalities. In the executive committee of the SACA again Nepal was asked to conduct the 5th SACA congress and Dr Prabhu Joshi was the President Elect to organize the same.

Even after two years there was no proper response from the Nepal Society of Anaesthetists and Dr.K.Balakrishnana was asked to continue the President of SACA post for one more term. After consulting the SACA Committee members of other countries, again Bangladesh was requested to organize the 5th SACA congress to avoid too much interval between the events. When Bangladesh expressed their initial financial difficulties the Organizing committee of 4th SACA i.e.INDIA helped them to start the proceedings by providing \$2000/- (Two thousand American Dollars). The 5th SACA congress was again conducted at Dakha in 2003 and large number of delegates attended the meeting. The President Elect this time was Prof.Khalilur Rehman, one of the very well respected number of the SAARC countries. They also organized a satellite meeting at Katmandu, Nepal with the help of Nepal Society.

Prof.Swinithi Ranasinghe was the President Elect who organized the 6th SACA by the Sri Lankan Anaesthesia Society in the year 2005 at Colombo with lots of scientific programmes and Cultural and a satellite meeting at Kandy. Since SACA Presidents did not have any President's Medal worth mentioning, the 4th SACA congress organizers presented a

“GOLD MEDAL” with chain during the meeting. This time the Nepal Society of Anaesthetists were ready with all the preparations to conduct the 7th SACA at Nepal in 2007.

Prof. Goutham Bajracharya was the President Elect to organize the congress 2007. When Nepal society needed financial help again the 4th SACA organizing committee gifted them \$1000/- (One Thousand AmericanDollars). The Nepal Society of Anaesthesiologists organized very good scientific and other programmes and post congress meet after the regular congress.

The following decisions were taken and being followed in all the SACA conferences which were conducted so far,

- The host country should not only charge local registration fee but also help SACA delegates with visa and accommodation facilities.
 - Each Country hosting the congress should borrow the seed money from the host society which would be paid back subsequently.
 - Any profits made after conducting the congress should be deposited in the bank in the name of SACA and used for educational purposes and it was suggested that each country should give a report of their educational activities in the SACA meeting.
 - It was also decided that the host country since it is bidding for the congress would have to bear the loss of it happens after conducting the congress.
 - Since the word SACA is not very familiar with all the officials, to facilitate a better recognition, visa formalities and aid from the respective governments, the SACA in future will be called as SAARC Association of Anaesthesiologists.
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