

BERITA Anesthesiologi

Newsletter of the • Malaysian Society of Anaesthesiologists
• College of Anaesthesiologists, Academy of Medicine of Malaysia



**Malaysian Society
of Anaesthesiologists**



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Academy of Medicine of Malaysia**

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EDITORS Dr Shireen Jayan
Datin Dr V Sivasakthi

Message from the President of the MSA



Dear Colleagues,

Happy New Year to all of you! I find it hard to believe that 2012 had already come to an end and that we are on the dawn of 2013.

This calendar year has been a challenging yet successful year for MSA. It always appears encouraging to write our successes:

1. We had our colleagues from Myanmar come for a visit to Malaysia and we shared our practices between both countries. We are continuing to forge relationships by sending our own anaesthetists to their country if they are interested to invite us for their CME activities.
2. We had an extremely successful Annual General Meeting in Kuantan, Pahang, which had good scientific content and social activities that were thoroughly enjoyable.
3. The National Anaesthesia Day was held in the grounds of Hospital Kuala Lumpur with the theme "Surgery In A Day, What Do You Have To Say", referring to our dedication in promoting Day Care Surgery as a way forward. It was an absolute success!
4. The successful launching of the fourth issue of our Year Book 2011/2012, thanks to the efforts of Dr Shireen Sree Jayan and Dr Vanitha Sivanaser. They had chosen the theme of '*Subspecialties in Anaesthesia*'

which was very appropriate. If you haven't read it, now is the time to start as the articles are so informative and helpful.

5. A handbook on TIVA and a protocol for the "Use of Sugammadex" were launched on our website for members' use and reference.
6. *Ovid subscription to access important journals* was finally made available to meet the requests of our members.
7. A very successful CME and CPD programme for our members.

I have not mentioned all the other routine activities as I believe the colourful and comprehensive articles written in the Berita would have kept you informed.

Now what is happening in 2013?

For starters, the **MSA AGM** is scheduled tentatively for 7th April, 2013 in Kuala Lumpur. The theme is related to the medico-legal aspects in anaesthesia. Mark your calendar for this show stopping event! It also heralds the oncoming election and a warm welcome to the Incoming President and the new Executive Committee. I take this opportunity to invite all of you to attend the AGM and partake in the election of office bearers as well as sharing your ideas and suggestions with us for a better and more efficient running of our Society.

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AOSRA-PM on 19th - 22nd June 2013 in Kuching awaits you as it is also the 50th Anniversary of the MSA. This Golden Jubilee Anniversary of MSA is going to be the best ever event you have attended. The scientific committee has put forth very current topics and the social committee is going to great lengths to make this event memorable. Please be there. You can already book your cheap air flights now.

You would have seen on our website that we request any photos, articles or any material that you can give us to aid the editors in the writing of the **History of MSA** as that will be the legacy that we leave behind for our future younger anaesthetists. Please do not disregard my request and I beg the senior anaesthetists to share their material with us so that our book will be accurate and informative. Friends, come and watch the launching of this book during the Gala Dinner and also watch out for what you have to wear...to match the Dinner night theme!!!


Hey members, please do not think that I have forgotten

the request for a **Family Day** for MSA members. Professor Dato' Dr Wang Chew Yin has kindly agreed to organise this for us and it would be coming round the corner in February/ March 2013. My biggest worry is that nobody will turn up as I understand that everyone is busy but remember that only your support and participation can make this event a success. Keep an eye out for the announcement!

Anyone with **research projects** which requires some funding? Well, write in and we will see how we can help.

Members, I thank you and hope to hear your thoughts and aspirations... drop me a line.

Meanwhile, ponder on this one...


"Twenty years from now you will be more disappointed by the things you didn't do than by the ones you did. So throw off the bowlines. Sail away from the safe harbour. Catch the trade winds in your sails. Explore. Dream." -- Mark Twain. American humorist, writer and lecturer, 1835-1910 

Pre-Trainee Course (Preparatory) for Master Anaesthesiology 2013

Report by Dr Suhaimi Jaaffar, Anaesthesiologists, Sarawak General Hospital, Sarawak

Over twenty-two participants from Sarawak, Sabah and Labuan stepped away from their daily duties last Saturday and Sunday, December 1st and 2nd 2012, to attend the preparatory course for Masters in Anaesthesiology 2013 in the General Intensive Care Unit Seminar Room, Sarawak General Hospital. This was a joint course between the Sarawak General Hospital and Kuala Lumpur Hospital, anaesthesiology department. Thanks a lot to Dr Norzalina Esa, Head of Department and Senior Consultant Cardiothoracic Anaesthesiologist and Perfusionist Sarawak General Hospital, for being the chairperson and adviser for the course.

The organising committee included Anaesthesiologists, Paediatric Anaesthesiologist, Sarawak General Hospital & Cardiothoracic Anaesthesiologist and Perfusionist, Sarawak General Hospital Heart Centre. Dr Mat Ariffin Saman, Dr Nora Hasiah Idris, Dr Hanafi Sidek, Dr Hasmizy Muhammad, Dr Teo Shu Ching, Dr Peter Tan Chee Seong, Dr Jamaidah Jamorek@ Jamhuri, Dr Mustaffa Kamil Zainal Abidin, Dr Arun Ilanthirayan, Dr Najwa Mansor, Dr Suhaimi Jaaffar, Dr Sri Rahayu, Dr Asmah Zainudin, Dr Yeoh Aik Hoe and Dr Lai Sien Chiak were the featured speakers, inspiring and sharing knowledge on the basic topics of pharmacology and physiology in anaesthesia.

The lecture struck a chord with participants who remarked, "we feel a new sense of purpose towards the lecture we've been assigned to. We're motivated to study hard and pass the masters exams". With motivation and a chance to interact with successful anaesthesiologists and the captivating scenery from Kuching, Sarawak, it was truly a day to remember. 



Hospital Kuala Lumpur

Speech by YB Dato' Sri Liow Tiong Lai, Minister of Health Malaysia

13th October 2012

(which was read by the Director-General of Health Malaysia)

Y Bhg Datin Dr V Sivasakthi

President, Malaysian Society of Anaesthesiologists (MSA)
Organising Chairperson for Anaesthesia Day 2012, and
Head of Service for Anaesthesiology and Intensive Care
Ministry of Health Malaysia

Y Bhg Assoc Prof Datin Dr Norsidah Manap

President, College of Anaesthesiologists, Malaysia

Y Bhg Dato' Dr Zaininah Md Zin

Director, Hospital Kuala Lumpur

Distinguished Guests, Ladies and Gentlemen.

Salam 1 Malaysia and a very good morning to all of you.

First and foremost, I would like to thank Hospital Kuala Lumpur and the Malaysian Society of Anaesthesiologists for inviting me to be with you all at this special annual event held in conjunction with National Anaesthesia Day 2012. It is indeed an honour for me to participate in celebrating Anaesthesia Day, as this day is also a celebration of anaesthesia as a profession, and also, all their accomplishments throughout the year. This year, the theme chosen is Surgery In A Day, What Do You Have To Say? This theme is very apt and timely, as Day Care Surgery is current and the theme depicts their dedication in promoting Day Care Surgery as the way forward.

1. Day Care Surgery has undergone an impressive growth in the last two decades and it accounts for nearly 90% of all surgeries performed. It is the global trend now and I am indeed glad to see that HKL has taken the challenge to provide this service which provides more flexibility and convenience to patients without compromising safety and quality of care.
2. We are moving towards becoming a high income nation and thus, our health care delivery system has to be transformed as well. While maintaining focus towards providing for the health and well-being of Malaysians, we also realise the unlimited economic potential of this sector. Beyond just the organic growth in services, pharmaceuticals and medical devices, we will explore new horizons in services, clinical research, health travel, and generics pharmaceuticals manufacturing as we aspire to contribute USD10.4b to GNI by 2020. To achieve this, I seek the support of all healthcare providers, corporations and organisations. We have to work together to achieve this common goal.
3. Spurred by demographic shifts such as extended longevity and a rise in lifestyle diseases such as hypertension and cardiovascular ailments, cancer and diabetes, national healthcare costs are increasing dramatically. At the same time, the health industry has become a powerful engine of economic growth. Malaysia's record of healthcare expenditures is no exception to the rule. At 4.8 percent of GDP, our spending on healthcare is above our regional peers and public spending is a disproportionate contributor to healthcare costs. The burden on public spending is even more pronounced when compared to countries in the upper-middle to high-income brackets.

4. Malaysian healthcare industry is expected to be a robust economic engine and one that indirectly creates significant social impact. Higher value jobs will be created, infrastructure can be upgraded and both specialist skill-sets and technology can be harnessed to improve the quality of care for patients. When examined from a profitability and growth lens, the Malaysian health sector opportunity looks extremely attractive despite its modest beginnings. Our expectation is that focus on the largest economic engines will directly impact the healthcare infrastructure and indirectly result in better quality care for the rakyat. For example, the increase in hospital beds, doctors and nurses as a result of the growth in the healthcare industry should reduce waiting times for patients, shorten the turnaround time on diagnostic lab results and improve the quality of patient outcomes through access to more specialist care. With 1.9 beds per thousand and 0.8 doctors per thousand as of 2008, Malaysia has a solid foundation to build on. In addition, the high incidence of lifestyle diseases and experience with quality assurance, permits Malaysia to be a credible R&D and clinical trial destination for the pharmaceutical and medical technology industries. Our goal is to migrate from primarily a lower-value product strategy to a more comprehensive product, services and asset strategy that better leverages our competencies. And definitely anaesthesiology is such an important and vital service which has great future in our healthcare system despite being labelled as one of the highest budget consumer in Ministry of Health.

5. The Ministry of Health has always appreciated the critical role of the anaesthesiologists as a member of the team in the operating theatre and they have never failed MOH before as they are constantly and consistently expanding their scope of services outside the operating theatre, to become actively involved not just in intensive care, which has always been the domain of the anaesthesiologists, but also in the management of acute and chronic pain, obstetric analgesia services, anaesthesia outside the operating theatre and resuscitation. The anaesthesiologists have also contributed an important part in the overall improvement of operative services for patients by setting up anaesthetic clinics for preoperative assessment as well as day care services.
6. However, your specialty is facing many challenges too which I have taken note of, in particular, those related to professional/manpower shortages. I will try my best to help you resolve them. In the annual census of anaesthesiology and intensive care programme Ministry of Health in 2011, there were about 295 anaesthesiologists in our hospitals with 599 medical officers, 287 assistant medical officers, 704 anaesthetic nurses and 2,142 intensive care nurses; providing 339,844 anaesthetics in 83 hospitals and intensive care for 32,621 patients in 47 general intensive care units. The workload has been increasing yearly in contrast to the limited resources available to us.

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7. Another very obvious fact is the prevailing ratio of anaesthesiologists to surgeons, which is about 1:4 compared to 1:2 in developed countries. The problem of mal-distribution of specialists is very apparent in the Klang Valley, where we see a disproportionately high number of private anaesthetists. I was told that a similar picture holds true for other disciplines as well.
8. As one of the short term measures to rectify the situation, doctors have been allowed to run elective lists on Saturdays since 2008, in addition to allowing locum or sessional services by private anaesthesiologists. To date, 34 MOH hospitals have been opening their OTs to provide surgeries electively to appropriate patients in more than one operating slots. Extended operating hours during the weekdays are also being approved for hospitals with very heavy workloads.
9. As for day surgery where selected patients come for their surgery in the morning by appointments and discharged home on the same day, is on the rise. However, more uptake or buy-in from the surgeons is required. The day care surgery offers several advantages to patients, doctors and hospital administration including cost. It is expected to be 25%-75% lesser in cost than that of a similar inpatient procedure. The successful conduct of anaesthesia is based on careful patient selection, type of surgery, the facilities available, appropriate patient preparation, and planning. Even the extremes of age are not a deterrent for day care surgery, provided proper attention is paid to discharge planning. Children are excellent candidates for day care surgery as it provides minimal separation from parents and minimal exposure to hospital environment and hospital-acquired infection.
10. Day surgery anaesthetics has increased by 51% in 2011 compared to 2010 and to facilitate this service, MOH has distributed concise protocols or guidelines to all hospitals on how to manage and provide an effective and efficient Day Care Services and Anaesthesia. Various activities have been undertaken in 2012 including this event today to promote and publicise day care surgery services nationwide. Next year, we hope to see the fruits of our labour.
- 11 Finally, ladies and gentlemen, let me once again, thank you for your kind invitation. I hope that my presence here will signify to you the high esteem that the Ministry and I hold for your specialty, and I look forward to the strengthening of this special relationship with your fraternity. Together, let us strive to bring the anaesthesiology and intensive care services in Malaysia to greater heights. Thank you. ©

NATIONAL ANAESTHESIA DAY 2012

Hospital Sultanah Aminah, Johor Bahru

Report by **Dr Abigail Choong**, MO Anaesthesia
16th October 2012

This year the Department of Anaesthesiology and Intensive Care decided to celebrate this important day in a small yet memorable way on that very day ie. 16th October 2012 which turned out to be Tuesday, a working day.

The day started bright and early at 7.30 am. We started with cutting a 'birthday' cake in the Department. To the surprise of the senior anaesthesiologists, majority of the medical officers and some of the specialists in the Department did not know why 16th October was chosen to be the Anaesthesia Day. Wah! A lot more education needs to be done.



Visitors at the exhibition

In the meantime, an exhibition was set up at the foyer in the Outpatient Clinic. The exhibition included a video presentation and a simulated operating theatre. The video presentation consisted of a patient's journey through an operation. With Bob Marley's lyrics "Don't worry about a thing.... every little thing is gonna be alright" on the background, the video showed a patient being assessed, anaesthetised, operated, monitored, woken up, sent to recovery room and discharged to the ward. This was a homemade video and was filmed in our Operating Theatre a few days prior to the Great Anaesthesia Day.

The simulated Operating Theatre was complete with GA machine, a mannequin patient, drip stands with IV lines and airway equipment. A number of anaesthetic doctors were at the scene to explain the role of the anaesthetic team to the general public. We even gave some a go at intubating the mannequin!

In addition to the exhibition, two interview sessions were held. The first was an interview with a patient who had the experience of undergoing both general and regional anaesthesia. The second interview was with Dr Lakshmi, our Paediatric Anaesthetist, who spoke on the role of an anaesthetist and gave a demonstration of how an epidural was done. The interview was followed by a question and answer session. Among the questions were those "well-known" myths such as "Will undergoing GA repeatedly affect one's brain?" and "Will getting an epidural cause long term back pain?"

By the end of the day, about 150 people visited the exhibition. Hopefully, we did send out the message that anaesthetists are doctors who manage a patient holistically throughout the perioperative period and are not just glorified gas technicians! ©



A makcik taking notes intently as the doctor explains what goes on in the OT.

Hospital Tuanku Fauziah, Kangar, Perlis

DATE : 13th October 2012
PLACE : C-mart, Arau, Perlis
TIME : 10.00 am to 5.00 pm
THEME : Know Anaesthesia

OBJECTIVE

To educate the public regarding anaesthesia in order to:

- Create awareness
- Build rapport
- Minimise public apprehension towards anaesthesia

PATRON Dato' Dr Nordin Bin Mohd Jais
Director, Hospital Tuanku Fauziah, Kangar, Perlis

ADVISOR Dr Ismail Bin Ahmad
*Consultant & Head of Anaesthesia & Intensive Care
 Department, Hospital Tuanku Fauziah, Kangar, Perlis*

COMMITTEE MEMBERS

1. Dr Rozaimah Bt Jamiran
2. Dr Azilah Bt Desa
3. Dr Normi Bt Siron
4. Dr Nurnajmi Bt Abdul Halim
5. Dr Noor Azura Bt Che Senapi
6. Dr Aainaa Nadirah Bt Mohd Yusoff
7. Dr Siti Asma' Bt Abdul Rahman
8. Dr Amira Aishah Bt Che Ani
9. Dr Sakinah Bt Mohd Akhir
10. Dr Azhar B Abdul Orani
11. Dr Alamelu A/P Govindasamy
12. PPP Hj Syed Baharuddin B Syed Darus
13. PPP Hj Abdul Nizam B Abdullah
14. KJ Zawiyah Bt Ahmad
15. KJ Che Salma Bt Abd Rahman
16. KJ Norzarina Bt Jamaluddin
17. KJ Wan Rafeza Bt Rokimi
18. PPP Ahmad Azlan B Basri
19. PPP Firol Nizam B Sudin
20. PPP Mohd Akmal B Che Ani
21. PPP Mohd Nazri B Senik
22. JT Norzaliza Bt Chik
23. JT Norfazilah Bt Abd Rashid
24. JT Noridayu Bt Darus
25. JT Wan Shazarianty Bt Wan Asri
26. JT Hamizon Bt Ahmad
27. JT Shakila Bt Shahidan
28. JM Fazilla Bt Ghazali@Mat Rol
29. PT Siti Najwa Bt Nordin



Staf Anestesia bergambar beramai-ramai bersama dengan Ketua Jabatan Anestesiologi & Rawatan Rapi Hospital Tuanku Fauziah

OPENING CEREMONY

By Dr Ismail B Ahmad (Representing Pengarah)

ACTIVITIES

1. Anaesthesia Exhibition
 - a. Anaesthesia Quiz
 - b. Demonstration of Intubation
 - c. Demonstration of General Anaesthetic Machine & Patient-Controlled Analgesia Machines
 - d. Video Show of Patient Underwent General Anaesthesia
 - e. Consultation Regarding Anaesthesia
2. Blood Donation
3. Organ Donation

ATTENDANCE Anaesthesia Exhibition: More than 400 Visitors
 Organ Donation: 25 Pledgers
 Blood Donation: 17 Donors

PREPARED BY Dr Normi Bt Siron
 Dr Azilah Bt Desa
 Dr Aainaa Nadirah



Orang awam sedang menderma darah antara aktiviti Hari Anestesia bersama unit transfusi HTF



Pemasangan banner di Hari Anestesia



Orang ramai sedang menonton video show teknik pembiusan dan pembedahan



Staf serta MO Anest sedang memberi penerangan kepada pelawat



Orang ramai sedang melawat pameran



Proses intubasi keatas pesakit yang menjalani pembedahan ditunjukkan



Ahli Jawatankuasa Pendermaan Organ HTF sedang memberi penerangan kepada orang awam, antara aktiviti bersama Hari Anestesia

Hospital Sg Buloh, Selangor

Report by RANESH REKHA

Dr William Green Morton pioneered the use of nitrous oxide as the first inhalation anaesthetic in 1846. 166 years later, our profession pays homage to him, and the other giants of our profession, by celebrating International Anaesthesia Day on 7th October 2012. With quintessentially impeccable Malaysian timing, we celebrate our National Anaesthesia Day on a few days later, on 16th October 2012. This year's mission chosen by our Malaysian Society of Anaesthesiology, to build general awareness regarding daycare surgery, only goes to show how far the practice of medicine has evolved since 1800's.

Sungai Buloh Hospital's contribution this year towards achieving our mission was to organise a whole-day campaign to increase awareness of daycare surgery amongst our patients, their relatives, students in both the medical and allied sciences and members of the public at large. Our ten man team, comprising Dr Lim, Dr Quah, Dr Seet and other specialists, medical officers and nurses, set out to educate our visitors on the existence and availability of the option of daycare surgery.

The logic behind raising patient awareness of daycare surgery as an alternative is impeccable, and especially relevant to our times. An increase in patient awareness of daycare surgery will lead to more informed choices being made, with a consequent decrease in admissions. This will ease the burden on our hospital resources, which in turn, enhances the efficiency and quality of healthcare that we are able to provide. These benefits will be seen by all – patients, doctors and staff alike.

With this in mind, we organised our day to start with an opening ceremony and presentation, followed by the



division of our team into several groups – there was an intubation booth, a mock operating theatre and then a quiz (and suitable prizes to ensure attention) on day-care surgery. While the mock operating theatre certainly garnered its fair share of attention, the most popular booth was the interactive intubation booth – we were surprised at the queue that built up just for a turn to intubate the dummy.

Our early success and enthusiasm amongst participants to our booths went to some of our heads, until we realised that our earnest explanations of the types of anaesthesia offered, the types of monitoring done and appropriate pain management postoperatively explained did not have the desired effect. It was quite a challenge at times to have to explain fundamental medical and anaesthetic concepts, which we all take for granted, in everyday language and in a manner which would attract a layman's attention.

It was quite an experience though, and we came away heartened by spending a day in the company of our community and glad that we were able to improve patient awareness in some small way at least.

To sum it up, Anaesthesia Day 2012 was a success for our team, and complemented our current efforts to expand our day care services, in the (admittedly lofty) hopes that our surgeons and the public can work hand in hand with us moving towards a brighter future for medicine.

Congratulations

Passed Final MMed Anaes (UM) Exams Nov 2012

1. Dr Amelia bt Mohamed Ain
2. Dr Noriza Josti
3. Dr Roopak Singh a/l Raghbir Singh
4. Dr Sou Shin Ai
5. Dr Lee Pui Kuan
6. Dr Foo Li Lian
7. Dr Nithiakalyanee a/p Subramaniam
8. Dr Suziana bt Mohamad Rohani

Passed Final MMed Anaes (UKM) Exams Nov 2012

- Dr Aizatul Isla Abdul Latib
Dr Hafizah Md Noor
Dr Kevin Goh Chun Min
Dr Norhasnita Zakaria

Passed MMed Anaes (USM) Exams Nov 2012

1. Dr Azman Abd Hamid
2. Dr Azlan Sani Shamsuddin
3. Dr Norizawati Dzulkipili
4. Dr Syarihan Hussin

Penang Hospital, Penang

Report by Dr Khoo Teik Hooi

We celebrated the National Anaesthesia Day in Penang Hospital on Tuesday, 16th October 2012, the day internationally commemorated as World Anaesthesia Day.

The theme for this year's activities was "Surgery In A Day, What Do You Have To Say?" Our objectives were to create greater awareness of Day Care Surgery and to promote this service amongst both our public and our healthcare providers.

Our committee comprised doctors, nurses, medical assistants and support staff. Dr Lena Lee Meng-Li and her team worked enthusiastically to prepare for this occasion.

On Saturday, 13th October 2012, all surgical disciplines doing Saturday elective surgical lists participated by performing only day care surgeries. All these cases were done at our Ambulatory Care Centre Operating Theatres.

Prior to Anaesthesia Day itself, we organised competitions to generate interest in Day Care Surgery. These were Day Care Surgery Survey Questionnaires for hospital staff and a Day Care Colouring Competition for children at our Day Care wards. The winners of the competitions were announced and duly rewarded during the official ceremony on National Anaesthesia Day.

On Anaesthesia Day itself in Penang Hospital, our activities commenced with the opening ceremony held in the hospital foyer. The ceremony was graced by the attendance of Penang State Health Director, Dato' Dr Hj Lailanor b Hj Ibrahim; Deputy Hospital Director, Dr Shameni Sunasundram; Dato' Dr Jahizah Hj Hassan, Head of the Department of Anaesthesia and Intensive Care, as well as the heads of other departments, doctors, nurses, allied health staff and members of the public.

There were introductory and welcoming speeches by Dr Lena Lee, the organising chairperson of the event, Dato' Dr Jahizah and our State Health Director. The latter then officially launched the National Anaesthesia Day 2012 celebrations. The highlight of the event was an educational multimedia video presentation on Day Care Surgery creatively choreographed by our in-house film production crew.

After the ribbon-cutting ceremony inaugurating the launch of National Anaesthesia Day, we all adjourned to the Anaesthesia Exhibition site. Displays included Anaesthesia and Pain Management posters, a mock Operating Theatre, and priceless anaesthesia museum exhibits (facemasks, vaporisers, humidifiers, East-Bradcliffe and other antiquated ventilators, and the legendary Boyle's anaesthetic machine). The exhibition area was a crowd-puller and spurred members of the public to ask some very difficult questions of a standard on par with the Final MMed Anaes examination!

Our health screening and information booths for the public offered simple medical checks of blood pressure and blood sugar. It was such a hit with the public, drawing nearly 200 visitors in less than half a morning that we had to close early due to the overwhelming response as we ran out of test kits.

There were poster presentations reviving the History and Evolution of Anaesthesia, and extolling the value of Day Care Surgery and Chronic Pain services. Visitors were also given brochures on Day Care Surgery.

Our department members sported National Anaesthesia Day T-shirts and "Same Day Surgery" pin badges in declaration of our cause. These badges, with our day care surgery logo, were also given away to all our visitors.

Apart from creating awareness regarding day care surgery, we also received favorable feedback from hospital staff and from the public. Further publicity was generated via the TV media (RTM 1) and newspaper reports in The Star, Berita Harian, Kwong Wah and Sin Chew Daily.

As anaesthetists, we were all proud to celebrate this day. Anaesthesia has progressed tremendously since 1846 when the first public demonstration of anaesthesia was given. Although "hidden" from public eye, anaesthesia has contributed immensely to the progress in medicine and surgery.

The department would like to thank the Education Resource Unit of Penang Hospital, the Malaysian Society of Anaesthesiologists and the pharmaceuticals companies for their support in organising this event.



SARAWAK 2013
aosra-pm 12th Asian & Oceanic Society of Regional Anaesthesia & Pain Medicine Congress

Incorporating the Annual Scientific Meeting of the Malaysian Society of Anaesthesiologists (MSA) and the College of Anaesthesiologists & Golden Jubilee Celebrations of the MSA

"Exploring the World of Regional Anaesthesia & Pain Medicine"

19th to 22nd June 2013
Pullman Kuching, Sarawak, Malaysia
www.aosra2013.org

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Hospital Kajang, Selangor

The Anaesthesia Department in Hospital Kajang can be considered to be in our sophomore years in providing service to the public. However, we have not yet embraced the spirit of celebrating the 'birth' of Anaesthesia.

Thus, as a kick start this year, we successfully pioneered our 'National Anaesthesia Day' celebration after an immense effort dedicated by everyone in the department. Due to limited available venue, our one-day event intended for the public and other medical specialties was held at our Dewan Bistari and its surrounding area on the 16th October 2012.

The day begun with the officiating ceremony by our Hospital Director, who congratulated our department on our first commemoration and complimented us on our poster presentation which was concise and easy to understand by non-medical individuals.

Since our main objective was to create public awareness on different modalities of anaesthesia and the services available in our Intensive Care Unit, we had simulation stations representing the setting in the Operation Theatre and ICU, poster presentations, display of ventilators and monitors, as well as intubating equipment i.e. glidescope, CPR demonstration station and video presentations. Some of the visitors were quite amazed by the vocal cord anatomy seen on the glidescope monitor. Apart from that, we also took the opportunity during this event to promote organ donation and succeeded in enlisting 20 donors!

Free health screening, dietary advices, as well as free bone scans by Anlene were conducted on this day. Maycare, Vico and Yakult were also invited to carry out their promotional sales. As a whole, these booths received good response from the public.

The highlight of the day was the quiz pertaining to anaesthesia, of which the answers could be found in our exhibits. The response was overwhelming until the prizes had to be replenished.

As part of our evaluation strategy, we carried out a feedback survey amongst the crowd who attended the event. In general, they felt enlightened by the information gained from our exhibits and realised the importance of the anaesthesia team in a hospital.

Overall, it was a fun but tiring day. We felt satisfied as the outcome of the event was beyond our expectations. We hope our celebration in the future will be more successful and the public will be more appreciative of our efforts in saving and improving their quality of life.



Hospital Melaka, Melaka

Report by **Dr Sharon Oh, Specialist**

The National Anaesthesia Day celebrations in Hospital Melaka this year themed "Surgery in a Day, What Do You Have To Say?" was successfully held in October 2012. The main aim of the campaign was to showcase Daycare Anaesthesia as an integral part of the anaesthetic services in our hospital and the important and advantageous role it plays in minimising costs and improving patient satisfaction.

Preparations started a good few weeks prior to the event with the designing of brochures and posters for the exhibition which was to be held in the hospital lobby. The team effort was apparent as everyone took to their tasks with enthusiasm.

Events kicked off on 8th October 2012 with Dr Raja Liza and Dr Sharon Oh taking to the airwaves to promote and publicise the event. The half-hour long stint on the weekly local radio show was aimed at raising awareness about anaesthesia and inviting members of the public to attend the upcoming National Anaesthesia Day celebrations.

By the time the fourth week of October rolled round, we were in full-swing and ready for the masses. Posters explaining the purpose of daycare anaesthesia, the criteria for patient selection, the flow of events and such were set up for the

week-long exhibition in the hospital lobby. Besides that, an information counter manned by members of the anaesthetic team comprising both doctors and paramedics, were on hand to field any queries from the public regarding anaesthesia in general and also daycare anaesthesia in particular. Specially designed brochures were also handed out to the public to take home, along with a little token of appreciation for patronising our exhibition. We had initially wanted to run a Day List during the festivities in solidarity with other hospitals nationwide. Unfortunately, this was not possible because our Daycare Operating Theatre was being utilised to run our major elective and emergency lists as our Main Operating Theatre was undergoing renovations.

The celebrations were officially opened by the Timbalan Pengarah of Hospital Melaka, Dr Raof Abdol Jaafar, on the 24th October 2012. Abbott joined in the festivities as well, bringing with them, their impressive displays on anaesthetic equipment, both ancient and current, together with posters, banners and bunting on daycare anaesthesia. The week-long event was well-attended by members of the public as well as staff from other disciplines. Many showed a keen interest in anaesthesiology and went away with a better understanding of what actually goes on 'behind the scenes'.



Hospital Raja Permaisuri Bainun, Ipoh, Perak

Report by **Dr Rohaniza Alias & Dr Too Heng Hau, Specialists**

Department of Anaesthesia and Intensive Care

The department of anaesthesiology and intensive care of Hospital Raja Permaisuri Bainun, Ipoh, Perak, held a three-day exhibition from 15th to 17th October 2012, in conjunction with World Anaesthesia Day, to commemorate the beginning of modern day anaesthesia in 1846.

The exhibition was held in the lobby of the ambulatory care centre. Besides posters and on-site explanation on what anaesthesia is all about, special emphasis on daycare surgery was given this year in line with the theme of the 2012 National Anaesthesia Day. A true-or-false quiz with prizes was conducted on each day to raise awareness on daycare surgery, along with other activities that were meant to attract the public and hospital staff to the event. These activities were BP measurements, capillary sugar level checks, BMI calculations, and finally the necessary medical referrals and advice. Numerous posters on day care anaesthesia were put up and visitors were encouraged to walk



around and view them. A total of 280 people had participated for the check-ups and quizzes.

Two daycare cases were interviewed. Mr Kannan, who had his hip-screws removed, rode a motorcycle to hospital, but was happy to return home with a taxi, accompanied by his wife. En Muhamad, whose family lived in Parit Buntar (two hours away), understood the safety of staying overnight at nearby Kampar town (30 mins away) at his in-laws' house, after his son had minor surgery. Hopefully, these two families will help to spread the news of daycare surgery to their friends and family, beyond the capacity of our awareness drive on those limited three days.

In conclusion, it was a fruitful three days. We hope that the public is more aware about the benefits of day care surgery and are now more knowledgeable and hence, will ask their surgeon about it when posted for elective surgery.



7th Biennial Conference on Cardiopulmonary Bypass

by Dr Hasmizy bin Muhammad, Pusat Jantung, Hospital Umum Sarawak, Sarawak

Held from the 28th June till 1st July 2012 in Pullman Hotel, Kuching, Sarawak, the 7th Biennial Conference on Cardiopulmonary Bypass organised by the Cardiothoracic Anaesthesiology and Perfusion Unit, Sarawak General Hospital Heart Centre, in collaboration with the Postgraduate Medical Education Society of Sarawak General Hospital, was a very successful event. This conference was also supported by the Ministry of Health Malaysia and the Sarawak Convention Bureau and was for the second time organised by the same unit from 2006. The theme of this year's conference was "New Frontiers and The Extra Mile".

More than 350 delegates attended and participated in the pre-congress workshop and three-day scientific conference, which brought together doctors, nurses, perfusionists and other allied health personnels from Perfusion, Cardiac Anaesthesia, Cardiothoracic Surgery, Adult and Paediatric Cardiology, and many others involved in the care of the cardiac patients. Besides our own Malaysian delegates from MOH and private hospitals, delegates as far as Japan also attended this conference.

The conference organising chairperson Dr Norzalina binti Esa welcomed the delegates before it was officially opened by Dr Chin Zin Hing, Deputy Director (Medical Care) Sarawak State Health Department. Later, the Guest-of-Honour visited 32 booths by the pharmaceutical and medical equipment companies at the expo hall.

The pre-conference workshops were haemodynamic monitoring, ventricular assist device/extracorporeal membrane oxygenation (ECMO) and transoesophageal echocardiography. It is interesting to note that transeoesophageal echochocardiography simulator made its debut in Malaysia for this conference.

The comprehensive scientific programmes to cater to the wide spectrum of interest in cardiac services were delivered in plenary lectures and concurrent symposium sessions. There were also lunch and dinner talks sponsored by the pharmaceutical companies.

A total of 36 distinguished speakers, both from locals and overseas as far as Canada, Europe, New Zealand, Japan, South Korea, The Philippines, contributed towards the success of the conference.

Social activities were also planned during this conference. On Saturday night, delegates were treated to a Gala Dinner and entertained by the local ethnic entertainers from 'Bung Bratak' group and there were also splendid performances from MOH cardiac centers such as Hospital Umum Sarawak, Hospital Queen Elizabeth and Hospital Pulau Pinang. The next morning, about 70 delegates took part in the aerobic session at the famous Kuching Waterfront by a qualified aerobic instructor.

In summary, it was a successful conference and it would not have been possible without the hard work and dedication of the organising committee, secretariat, sponsors, exhibitors and the delegates who had taken their time and effort to attend this meeting.



Dr Chin Zin Hing, Deputy Director (Medical Care), Sarawak State Health Department, was accompanied by Dr Norzalina binti Esa and Dato' Dr Jahizah binti Hassan officiated the conference.

One of the participant in transoesophageal echocardiography workshop had hands-on with TEE simulator.



Participants in haemodynamic workshop with cow hearts.



A very energetic and vibrant performance from Sarawak General Hospital Heart Centre's dancers.



Delegates had their work-out session in morning aerobics.

Obstetric Anaesthesia Symposium 2012

by Dr Saidatinal Azmar

Hospital Sultanah Bahiyah, Alor Setar, Kedah

The Obstetric Anaesthesia Symposium 2012 was successfully held on 14th July 2012 at Regency Hotel, Alor Setar, Kedah. The event was jointly organised by Department of Anaesthesiology and Critical Care, Hospital Sultanah Bahiyah, Alor Setar, Malaysian Society of Anaesthesiologists and College of Anaesthesiologists.

It started with a humble aim to provide a continuous learning platform for the anaesthesia fraternity for the northern region only.

It never crossed my mind that it will attract participants from as far as Sabah and Sarawak. There were 163 registered

participants, which exceeded the anticipated 80-100 participants resulting in a 95% attendance.

Five speakers from Obstetric Anaesthesia Special Interest Group include Dr Rohisham bin Zainal Abidin, Dr Norliza Mohd Nor, Dr Thohiroh Abdul Razak, Dr Nadia Md Nor and Dr Mohd Azizan Ghazali, had brilliantly delivered their lectures on Heart Disease in Pregnancy, The Obese Parturient and Anaesthetic Management of Pre-eclampsia, as well as two forums on Labour Analgesia and Anaesthesia for Caesarean



Section. The event was officiated by Dr Md Mortadza Ramli, Head of Department of Anaesthesia and Critical Care, Hospital Sultanah Bahiyah. I would like to thank Dr Rohisham and his Obstetric Anaesthesia SIG colleagues, all my organising committee members as well as our commercial partners and the participants from all over the country for making this symposium a hugely successful event.



WELLBEING WORKSHOP

Our patients can only benefit from our care if that is given by a care-provider who is in the best of health not only physically but emotionally. Wellbeing of providers is the current focus of leading systems of care provision. To bring us to this level of focus is Dr Diana Khursandi, who plays a huge role in the Australian College of Anaesthesiologists in their WELLBEING subspeciality interest group. The College of Anaesthesiologists (Malaysia) would like to invite you to join us in the WELLBEING workshop:

- Venue:** Medical Academies of Malaysia, 210 Jalan Tun Razak, 50400 Kuala Lumpur
- Date:** 17th March 2013
- Time:** 0900 – 1500 hrs (Lunch will be provided)
- Theme:** ARE WE OUR OWN WORST ENEMIES?
- Topics to be covered:**
- Our own worst enemies
 - Have you got what it takes to run (or help run) a happy department?
 - How to cope with STRESS, FATIGUE & BURNOUT
 - Good time management
 - How do we deal with impaired colleagues?
- Fees:** Members of College of Anaesthesiologists (Free)
Non-Members (RM 20)

SECRETARIAT

College of Anaesthesiologists, AMM

G-1, Medical Academies of Malaysia
210 Jalan Tun Razak, 50400 Kuala Lumpur

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03 4023 4700, 03 4025 4700, 03 4025 3700

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This workshop is limited to 50 participants only. Please contact the Secretariat to book your place.

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and be receptive to even meagre changes. Nevertheless, as an independent body, I foresee a more important role for the CoA when these programmes require accreditation. Already the AMM is paving the way for us to be more involved in the training and certification of medical specialties and subspecialties.

Future Anaesthesia Meetings in 2013

Our small scale and cozy ASM AGM will be held on Sunday 7th April 2013 in Kuala Lumpur, so please save that date now. The

Well-Being workshop by Diana Khursandi is planned for Saturday 16th March and our Paediatric Anaesthesia Meeting (PAM) organised by the Paediatric Anaesthesia SIG will be on 22nd - 23rd March 2013 at the Shangri-La Hotel, Kuala Lumpur. The grand scale AOSRA-PM Congress will be in Kuching, Sarawak from 19th - 22nd June 2013. That is yet another event you would not want to miss. Keep checking at www.acadmed.org.my for more details and come and join us!

Thank you once again for all your support

over the years. It has been a fulfilling and unforgettable experience, made rich with all the ups and downs, the joys and the worries. Please forgive my shortcomings and excuse my imperfect performance. For me, it has been an honor to serve.

My wish is that all our specialist anaesthetists out there, will be a part of this College!

Assoc Prof Datin Dr Norsidah Abdul Manap
President, College of Anaesthesiologists, AMM
nmanap@ppukm.ukm.edu.my





Message from the President of the College of Anaesthesiologists, AMM

It is almost two years since I have been at the helm here, and before I leave, I need to express my appreciation and my thoughts on the current status as well as the future role of the College of Anaesthesiologists (CoA), AMM.

This may be a part-time voluntary job for me, but I must say it is a heavy load to shoulder, especially with intense Council meetings, building stepping stones through social collaborations, moving in-tandem with the Academy of Medicine's aspirations and making decisions, decisions and decisions. The thought of serving the MSA and then the CoA never crossed my mind earlier on in my career, but I am grateful for the experience and thankful for the opportunity to serve the anaesthesia fraternity. I must not however, forget to pen my sincere appreciation to all the Council members and of course, Ms Kong, and the secretariat, for giving me strength, direction and hope. It was very easy to feel lost and hopeless because the moves we wanted to make were not absolutely clear, even for us! Perhaps, I should explain a little.

Current Function and Future Role of the College of Anaesthesiologists

Even till this day, I have come across anaesthetists who are confused or uncertain about the functions of the Malaysian Society of Anaesthesiologists (MSA) and the CoA, AMM. Despite previous clarifications and reiterations, there is so much overlapping of agenda such as CPD programmes and personnel (same people involved), that the only basic difference to most is the subscription!

Well, the Council members in the CoA, AMM, deliberated many times back and forth on this issue and decided that we have to seriously widen the differences between the functions of the CoA and the MSA to be truly effective for our anaesthesia fraternity. Being under the umbrella of the Academy of Medicine of Malaysia, the CoA is also expected to follow suit their aspirations for all the medical disciplines, and currently we aim to steer towards maintenance of standards of practice, accreditation as well as the training and certification of medical specialties and subspecialties. This is a no small matter and actually, one step closer towards what our sister Colleges in the United Kingdom, Ireland, Australia and New Zealand are practicing.

The CoA plays a small role in the postgraduate Masters in Anaesthesiology programme at present. As members in the Conjoint

Board together with the Universities and the Ministry of Health (MOH), we contribute to its development and assist in nominating and inviting examiners and observers for the examinations. As for the subspecialty examinations of Intensive Care and Pain Medicine conducted by the MOH, the CoA has an even smaller role. Thus far, we have assisted in its partial funding and providing an examiner for their examinations.

In future, the CoA has the potential to be the neutral collaborative centre locally and internationally, for all parties involved, which is the MOH, the Universities and also the private sector anaesthetists. There will be a need to collaborate with Colleges from other countries and look for ways to improve the quality of our post-graduates and subspecialists, make our qualifications equivalent to others and assist in obtaining foreign placements for specialised attachments. The groundwork has already begun as we have started collaborations with several overseas Colleges but where it leads us and to what extent we can pursue this, will be left to be seen.

Future Focus of the College of Anaesthesiologists

At the last College Council meeting, we finally agreed to assign portfolios for the various major interests of the CoA. This will allow some focus and attention given to each important sector. These are:

1. Practice Guidelines / Recommendations

These will take considerable time to complete, coordination, preparation and adequate research. The 'Recommendations on Sedation by Non-Anaesthesiologists' is a collaboration between anaesthesiologists and non-anaesthetists and is on the verge of distribution. Others still in progress, are the 'Infection Control in OT', review of the 'Preoperative Assessment' and review of the 'Monitoring Guidelines'.

2. Specialists / Subspecialists Recognition in the National Specialists Register (NSR)

This allows liaison between the College Council and the anaesthesia subcommittee in the NSR.

3. Academic Liaison

- (i) Postgraduate (Specialty)
- (ii) Subspecialty
- (iii) International / Foreign

As mentioned above, there is a need to continue and expand various academic collaborations, both within the country, which is amongst the MOH, Universities and the private sector, and globally with our overseas counterparts.

4. CPD Credit Points

The AMM will soon be responsible for the on-line registration and capture of CPD credit points for all non-MOH specialists. This is for future reference and use in the re-certification and renewal of the registration in the NSR. Each College will be made responsible for the monitoring of the system in their specialty.

5. Special Interest Groups (SIGs)

The CoA has 12 SIGs that give focus and depth in each field. These are:

- 1. Airway Management
- 2. Ambulatory Anaesthesia
- 3. Cardiac Anaesthesia
- 4. Intensive Care
- 5. Neuroanaesthesia
- 6. Obstetric Anaesthesia
- 7. Paediatric Anaesthesia
- 8. Pain Medicine
- 9. Regional Anaesthesia
- 10. Simulation
- 11. Sleep Medicine
- 12. Well-being

They not only bring together anaesthetists with similar interests but also continually provide updated CPD programmes and create awareness for the various subfields of anaesthesia. In future, the CoA will require these SIGs to set standards of competency, develop guidelines or protocols, assist with training the trainers and credentialing pertaining to their field.

Limitations of the College of Anaesthesiologists

The College Council realises our limitations and the reasons why we are not able to be fully functional as the "academic arm" independently like our counterparts in the United Kingdom, Australia, Ireland, etc. Firstly, we lack manpower as all the council members and academically inclined participants are full-time anaesthesiologists with not much time to spare elsewhere. There is also a lack of permanent or dedicated secretarial staff to run the show, but above all, we lack the funding and resources. Unlike the MSA, we do not have access to scientific funds and our account balances are adequate but without much surplus. The CoA only plays a supportive and overlooking role in the postgraduate Masters in Anaesthesiology programme as it is run by the Universities (UKM, UM, USM and now UPM), and it has yet to have any concrete role in the subspecialty examinations. Many a time, our window of opportunity to contribute or be involved is often very small or vague, hence, we need to be on the constant look-out

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