Dear ESA Members,

The sixth annual meeting of the European Society of Anaesthesiology (ESA) in Helsinki on June 2010 was well attended and successful. In total, over the four congress days, close to 5,400 delegates visited Euroanaesthesia 2010. The ESA would like to thank delegates, faculty, exhibitors and everyone who contributed to making the congress successful. The mission of the ESA is to aim for the highest standards of practice and safety in Anaesthesiology, within the greater areas of education, research and professional development throughout Europe. Anaesthesiology also involves high standards in technology, which are continuously and rapidly developing.

The annual meeting plays an important role in promoting among European anaesthesiologists: a) the exchange of scientific and clinical information among its members; b) collective representation of shared interests; c) recognition of professional networks; and d) learning more about the latest products available.

We would like to emphasize, among many others, some important new initiatives and developments presented during Euroanaesthesia 2010:

a) The Helsinki Declaration on Patient Safety in Anaesthesiology;

b) The first ESA Plenary Lecture;

c) The launch of the ESA Clinical Trial Network;

d) The Autumn meeting;

e) The opening of the ESA to non-physician registered health professionals and medical students.

The Helsinki Declaration on Patient Safety in Anaesthesiology

During Euroanaesthesia, the Helsinki Declaration on Patient Safety in Anaesthesiology was read at the Opening session by Prof. Hans Knape, ESA Past President and EBA Past President, and officially signed by the President of the EBA, Dr Jannicke Mellin-Olsen, the President of the ESA, Prof. Paolo Pelosi, and the Chair of the ESA National Anaesthesiology Societies Committee, Prof. Hugo Van Aken. Furthermore, this year’s EBA Guest Session was dedicated to the Declaration. Speakers related to both EBA and ESA, National Health Authorities, the World Health Organization (WHO), the European Patients’ Forum, the World Federation of Societies of Anaesthesiologists (WFSA), the Union Européenne des Médecins Spécialistes (UEMS) and the medical technical industry highlighted various aspects of the Declaration. It was signed by several Presidents of National Anaesthesiology Societies as well as other stakeholders.

The Helsinki Declaration on Patient Safety in Anaesthesiology was accompanied by a special article explaining its historical development and main goals. This has been published in the European Journal of Anaesthesiology (Mellin-Olsen J, Staender S, Whitaker DK, Smith AF. The Helsinki Declaration on Patient Safety in Anaesthesiology. Eur J Anaesthesiol. 2010 Jul; 27(7):592-7).

It is now time to reflect on the launch of the Helsinki Declaration on Patient Safety in Anaesthesiology. “Patient safety” is now becoming topical following years of tireless and meticulous efforts by several colleagues and organisations. Yet we are still not utilizing all available knowledge to provide safer anaesthetic care in Europe.

The Helsinki Declaration on Patient Safety in Anaesthesiology is important for several reasons. It highlights European anaesthesiology and our role in patient safety in general. As anaesthesiologists, our role is to safeguard the best interest of the patient whenever he (or she) is at their most vulnerable, often not being able to take care of themselves.

The Helsinki Declaration from left to right: Hugo Van Aken, Chairperson of the NASC, Jannicke Mellin-Olsen, President of the EBA, and Paolo Pelosi, President of the ESA.
As professionals, we need to make very apparent that we are aware of this role, and that we are ready to take on that responsibility. The Declaration also demonstrates that anaesthesiologists do not exist in a vacuum. We have our responsibilities, but so do politicians, international and national health authorities, hospital executives, the medical-technical and drug industry, and the patients themselves. The fact that representatives of all these bodies were invited to sign the Helsinki Declaration on Patient Safety in Anaesthesiology demonstrates our invitation to a closer co-operation and a common goal.

The launch of the Declaration was a major undertaking, and the EBA has to be commended for it. The successful launch of the document would have only been a shooting star if it was not followed by a plan for further action. Such a plan is in place with the installation of the joint ESA-EBA Task Force on Patient Safety, chaired by Dr. Sven Staender. The ESA-EBA Task Force is now setting its priorities for the coming years, and we will be able to follow its progress month by month. The name of the EBA-ESA document has given it extra weight, with impressive positive feedback from all over the world after its launch. Other regions are also keen to see if they can endorse the document, or alternatively, use it to develop their own. Hence we are optimistic that the impact of our efforts will reach even beyond Europe.

We also hope that other specialities will be inspired by this document to join forces with us. The special area of competence/qualification (as it is now called in the European Union) – Intensive Care Medicine – launched a similar declaration last year, but to our knowledge, no other acknowledged European speciality has done the same. The efforts the EBA and ESA put into this important initiative demonstrated how fruitful and necessary the co-operation between the scientific and political bodies involved in Anaesthesiology are. The constructive atmosphere, in which both worked intensively together for months to develop the Declaration, will serve as a good basis for patient safety activities in the future, and also for developing other areas of mutual cooperation, for instance in education.

The EBA and ESA are very grateful to Prof. Hugo Van Aken for his initiative to develop this Declaration, to the group that has written it, and to the ESA Subcommittees on Quality and Patient Safety.

The term “Helsinki Declaration” has also been used by the Finnish tourist trade in relation to the sustainable development of tourism. We can confirm that the name of the EBA-ESA document has given it extra weight, with impressive positive feedback from all over the world after its launch. Other regions are also keen to see if they can endorse the document, or alternatively, use it to develop their own. Hence we are optimistic that the impact of our efforts will reach even beyond Europe.

The term “Helsinki Declaration” has also been used by the Finnish tourist trade in relation to the sustainable development of tourism. We can confirm that the name of the EBA-ESA document has given it extra weight, with impressive positive feedback from all over the world after its launch. Other regions are also keen to see if they can endorse the document, or alternatively, use it to develop their own. Hence we are optimistic that the impact of our efforts will reach even beyond Europe.

The Declaration also demonstrates that an -thology demonstrates our invitation to a closer co-operation and a common goal.

The launch of the Declaration was a major undertaking, and the EBA has to be commended for it. The successful launch of the document would have only been a shooting star if it was not followed by a plan for further action. Such a plan is in place with the installation of the joint ESA-EBA Task Force on Patient Safety, chaired by Dr. Sven Staender. The ESA-EBA Task Force is now setting its priorities for the coming years, and we will be able to follow its progress month by month. The name of the Declaration was intensely discussed before the launch, as there could be a risk of confusing it with the World Medical Association’s “Declaration of Helsinki”, which deals with ethics in medical research. This term has also been used by political bodies (related to the Conference on Security and Coopera -tion in Europe in Helsinki, Finland, 1975) and also by the Global Cities Dialogue on Information Society (GCD), which is a non-profit international association of Mayors and High Political Representatives.

The European Society of Anaesthesiology: Leading the way!

The first ESA Plenary Lecture

Anaesthesiology includes different areas of expertise, such as anaesthesia, intensive care, emergency medicine and pain management. All these components together, and not independently, are fundamental to make Anaesthesiology one of the most fascinating, continually developing and innovative areas of medicine in the past and forthcoming decades.

To emphasise the role played by European Anaesthesiology in the development of our Specialty, in education, training, and research, the ESA decided to recognise outstanding scientific contributors within our medical field with the introduction of an annual ESA Plenary Lecture. The ESA Plenary Lecture honours the memory of one of our specialty’s most distinguished leaders and mentors.

This new event resembles the Rovenstine memorial Lecture held during the Annual Meeting of the American Society of Anaesthesiology, honouring Emery A. Rovenstine, M.D., the distinguished anaesthesiologist who served the specialty of Anaesthesiology in so many ways. He is best known as a teacher and mentor for a generation of anaesthesiologists who went on to become leaders in our specialty.

During the meeting, Prof. Jennifer M Hunter delivered the first ESA opening Plenary lecture telling the audience of the anaesthesists in Liverpool, United Kingdom, who had been the major influence on her professional career and on the development of Anaesthesiology in Europe. She highlighted their international scientific contributions and called her lecture “You’ll never walk alone”, the anthem of Liverpool Football Club, to a full auditorium.
The ESA Plenary Lecture is intended to be given by an internationally recognised contributor to Anaesthesiology. It is envisaged that the lecture would not simply be a report of the lecturer’s own research but would have a broader perspective, possibly taking a philosophical or tangential approach to a challenging area of anaesthetic practice. The ESA was honoured to have Prof. Jennifer M. Hunter as the first Plenary Lecturer at Euroanaesthesia 2010. The ESA thanks her for being such a fine example of scholarly determination and academic accomplishment, and for her service to the Society.

Following the success of the first Plenary lecture, it is the intention of the ESA Board to entitle, in the near future, this Lecture to Sir Robert Macintosh, the first Professor of Anaesthetics outside the United States of America. He was the first Nuffield Professor of Anaesthetics in Oxford.

Sir Robert Macintosh designed equipment that now bears his name: a laryngoscope, an anaesthetic vaporiser, an airway spray and an endobronchial tube. The laryngoscope he designed in 1941 remains the most-used today. It was developed from a Boyle-Davis mouth gag, used for tonsillectomy.

Sir Robert Macintosh noted that this mouth gag indirectly elevated the epiglottis and exposed the laryngeal aperture. He also studied unexplained deaths that occurred under anaesthesia and established a training programme.

He travelled widely, giving demonstrations of “safe and simple” anaesthesia, being a pioneer of Patient Safety in Anaesthesiology. His quotes about the safe practice of anaesthesia were well-known by all his students such as “There should be no deaths due to anaesthesia”, “it is not the drug that is dangerous, but the man who gives it”, “a little will go a long way”, “just enough to do the job” and “anaesthesia deadly easy, easily dead” (Macintosh R.R. Deaths under anaesthesia Br J Anaesth 1949;2:107).

Prof. Hunter has kindly allowed the Newsletter to publish a précis of her lecture for those who were unable to attend (page 7).

It is hoped that, in future, international contributors of exceptional repute will give the opening lecture at our Euroanaesthesia meetings. This is another new venture for the ESA which is contributing to the international standing of our Society and making Euroanaesthesia meetings truly unmissable!

The launch of the ESA Clinical Trial Network

In Anaesthesiology, we need to think outside the box when it comes to research academic activities. We need to strengthen our ties with basic science departments, develop large clinical networks and look for new financial support for research collaborations. Research is a serious intellectual activity, and not a hobby. Anaesthesiologists are recognised as leaders in the development and widespread adoption of practice guidelines. However, the application of evidence based medicine in our daily clinical practice remains a challenge and requires a very structured approach to clinical care.

Unfortunately in Anaesthesiology, and in particular in general anaesthesia, we have a paucity of valid randomized clinical trials. In Anaesthesiology, serious deficiencies in study design remain, including sample size calculation, methods of randomization, blinded assessors, and statistics. To remain a viable and competitive clinical-research speciality, it is incumbent on clinical investigators as well as editorial boards to acknowledge these deficiencies and support adequate study designs ensuring high quality clinical trials. The gold standards in evaluating an effect of an intervention on patient outcome are prospective, randomized clinical trials. On the other hand, prospective observational databases may be extremely helpful in obtaining important information about clinical management and to design subsequent interventional trials. In Anaesthesiology large sample sizes are required, leading to increased costs and time for data collection.

To be successful five key components are needed:
1) Vision;
2) Skills;
3) Incentives;
4) Resources;
5) Action plans.

When all these are successful, a successful change will be obtained. Even if only one of them is unsuccessful, failure will result.

The aim of an ESA Clinical Trial Network (ESA CTN) is to provide an infrastructure that improves the care of patients in the fields of anaesthesia, pain, intensive care and emergency medicine through transnational European collaborative investigations. Critical care networks in different parts of the world have shown that some of the most relevant clinical questions can only be answered if several centres unite in their efforts. In Europe, many groups have undertaken successful clinical investigations in the field of intensive care medicine in recent years but, unfortunately, long-term collaborative relationships have not been achieved. Hence, the ESA decided to establish the ESA CTN, which aims at facilitating, integrating and supporting clinical Anaesthesiology research conducted by active ESA members.

The ESA CTN will be managed by the ESA Research Committee in collaboration with the ESA Scientific Committee and the National Anaesthesia Societies Committee, and will report to the ESA Board on its actions and activities. It will assist with communication, sponsorship, and grant applications between investigators and research groups. As a first step in the establishment of the ESA CTN, a call for Anaesthesiology centres willing to participate in multicentre studies on anaesthesia, pain, intensive care and emergency medicine will be published on the ESA website.
These centres will constitute the first core of the ESA Clinical Research Network, whose first task will be to collaborate in observational studies. It is the ultimate goal for the ESA CTN, of course, to launch multicentre interventional studies in the different fields of Anaesthesiology, preferably funded by EU resources. In order to support these goals, a full time CTN manager will be established in the ESA headquarters in Brussels. During Euroanaesthesia 2010 already four projects for multicentre observational trials were launched and all active ESA members are invited to participate in these studies.

For more detailed information on ESA CTN refer to the ESA website www.euroanaesthesia.org under the RESEARCH/Research Network section.

The Opening of the ESA to non-physician registered health professionals and also medical students

During the General Assembly held in Helsinki, it was agreed that non-physician registered health professionals and also medical students will be able to join ESA as members. The new membership will be applicable for the calendar year 2011. Non-physician health professionals play an important role in assisting Anaesthesiologists in their daily clinical practice. The ESA can reach out to non-medical personnel. Although associations for anaesthetic and intensive care non-physician health professionals do exist at a national and European level, no major recognition, formal or informal, is given at the European level or in most of the congresses related to Anaesthesiology.

Furthermore, the organization of the work of non-physician health professionals in Anaesthesiology, Peri-operative Medicine, Emergency Medicine, Intensive Care Medicine and Pain differs throughout European countries. The main objective is to facilitate the integration of non-physician health professionals within all the ESA committees and to develop active participation at all levels of the Society. The time has come when Anaesthesiologists and non-physician health professionals should collaborate together in joint educational, training and scientific projects.

Thus, we may be able to consolidate time and money for the education and training of physician and non-physician health professionals in areas that may benefit both groups and, more importantly, our patients. Contacts with major National and European non-physician health professionals involved in Anaesthesiology will be promoted for mutual collaboration.

Furthermore, the ESA will promote policies to more actively involve juniors / trainees and young researchers in its activities. The number of juniors / trainees attending our annual meeting is relatively low, even though it has increased in recent years. The ESA will make every effort at a European level to promote the involvement of juniors / trainees in the activities of our Society with awards, grants, and educational, training and research new initiatives. The future of Anaesthesiology and the ESA is in the hands of our younger colleagues to promote new ideas and initiatives. The ESA must engage with these young people giving them cutting edge research support with a portfolio of successful and innovative initiatives that connect our senior and youngest colleagues, as well as providing high-quality and engaging resources within Anaesthesiology. This may help to inspire the next generation of researchers and colleagues whilst supporting their teachers to allow both groups to develop new talents.

High scientific standards at Euroanaesthesia meeting, clear Education, Training and Research plans, mutual collaboration with other scientific and professional societies as well as increased support to young colleagues represent some of the cornerstones to lead the way of Anaesthesiology in Europe, making ESA the “natural” representation of the European Anaesthesiologists.

“**What we will be tomorrow, depends on how much energy we put today: we will get what we will pay !!**”

Paolo Pelosi
President of the ESA

Jannicke Mellin-Olsen
President of the EBA

Jennie Hunter
Member of the Nominations Committee

Andreas Hoeft
ESA Secretary and Chairperson of the ESA Research Committee

Hugo van Aken
Chairperson of the National Anaesthesiology Societies Committee

The Autumn meeting

It is with great pleasure that the ESA announces its first ever Autumn Meeting in Budapest in November 2010. More details are given later in the Newsletter. This is an exciting new venture for the ESA. We sincerely hope that this will provide even more opportunities for anaesthetists from all over Europe to come together improve further the care they give to their patients.
The General Assembly of the ESA took place in the Helsinki Exhibition and Convention Centre – Helsinki, Finland, on Monday 14 June 2010 from 12:15 to 13:30 during the Euroanaesthesia 2010 meeting of the Society. The meeting was chaired by Prof. Paolo Pelosi, ESA President.

Welcome
Prof. Paolo Pelosi presented the points on the agenda and welcomed all attendees.

Approval of the minutes of the 2009 General Assembly
The General Assembly approved the minutes of the 2009 General Assembly held in Milan, Italy.

President’s report
Prof. Paolo Pelosi
The President presented the different ESA activities and role of the ESA in the future including:

1. ESA and the European Union (EU): improve the visibility of Anaesthesiology to the whole population and particularly to political leaders.

2. ESA Scientific Committee: continued improvement in transparency and quality, more open to its membership.

3. Education, teaching and training in the ESA: improvement in the quality and implementation of adapted educational, teaching and training programmes among European Countries.


5. The ESA Council, the National Anaesthesiology Societies Committee (NASC) and the European Board of Anaesthesiology (EBA): harmonisation and design clear strategic plans.

6. Research in the ESA: promote high quality scientific activities of individual members and look for alternative financial resources; encourage ESA members to undertake clinical research to improve the quality of clinical anaesthesia.

7. ESA website: continue developing the image and the technological engine of the ESA, making it more user friendly and attractive to members.

8. Nurses and Allied Healthcare Professionals: encouraging our non-medical colleagues to join the ESA and its activities.

9. ESA and relationships with other scientific societies: educational, scientific and research mutual programmes at Euroanaesthesia and other European meetings.

10. ESA and the world: promoting supportive, educational, and training to less economically advanced countries (“ESA for the third world”).

Secretary’s report
Prof. Andreas Hoeft
The ESA Secretary presented the Specialist Societies that have recently joined the ESA:

- EACTA (European Association of CardioThoracic Anaesthesiologists)
- ESPCOP (European Society of Perioperative Care of the Obese Patient)
- EuroSIVA (European Society for Intravenous Anaesthesia)
- WSACS (World Society of Abdominal Compartment Syndrome)

The ESA Secretary also presented attendance figures for the Euroanaesthesia congress in Helsinki.

Treasurer’s Report
Dr. Maurizio Solca
The Treasurer presented the ESA annual accounts 2009 prepared in accordance with the Belgian Law Generally Accepted Accounting Principles and audited by Deloitte.

He reported that the 2009 expenses were under control and lower than budgeted (-11%).

The ESA Treasurer also presented the budget for 2010.

Some questions/concerns were raised by members about:

a) The ash cloud: we were covered by the insurance this year but insurance will not cover it anymore in future years (this should also be mentioned to delegates at the time of registration).

b) The impact of the financial crisis: there were reductions in valuations on paper but nothing was sold. Overall, the ESA was not deeply affected.

c) The increase in administration costs: more ESA activities require more support from the ESA Secretariat (although staff doubled in the last few years, salaries did not double). High increase in IT costs due to new website and database (need constant updates due to change or increase of ESA activities).

d) Who decides on rules for ESAACS grants to ESA? ESAACS is owned by ESA and chaired by a Board of trustees. ESAACS accounts will be presented to the Council and to the General Assembly for information (not discussion). Not possible in June 2010 as the year is not finished.

Approval of the 2009 Annual Accounts and 2010 budget
The General Assembly approved the 2009 annual accounts with 95.8% (4.2% abstained) and the 2010 budget with 92.9% (7.1% abstained).

Relieving the Board of Directors, Officers and Auditors of their liability for the 2009 accounts
The General Assembly agreed to grant full discharge to the directors, officers and auditors of their liability for the 2009 accounts.

By-Laws Amendments
Mr. Michel De Bisschop
Last year, the General Assembly suggested to the Board to reconsider point 7.4.4. of the By-Laws

- article 7.4.4. re-election of the members of the Board for one term of two years
- article 7.4.6. maximum term on the Board of Directors is seven years in total, except to allow the President, President-Elect and Past-President to serve their term of office as defined in 7.4.1.

Request for changing article 7.4.4. and allow re-election for two terms of two years to assure continuity on the Board of Directors. The limit of years to serve on the Board of Directors is anyhow limited by article 7.4.6.

Eventual changes to the By-Laws will be presented to the General Assembly 2011 in Amsterdam as there is no urgency to have it changed in 2010.

The ESA Treasurer also presented the budget for 2010.

Some questions/concerns were raised by members about:

a) The ash cloud: we were covered by the insurance this year but insurance will not cover it anymore in future years (this should also be mentioned to delegates at the time of registration).

b) The impact of the financial crisis: there were reductions in valuations on paper but nothing was sold. Overall, the ESA was not deeply affected.

c) The increase in administration costs: more ESA activities require more support from the ESA Secretariat (although staff doubled in the last few years, salaries did not double). High increase in IT costs due to new website and database (need constant updates due to change or increase of ESA activities).

d) Who decides on rules for ESAACS grants to ESA? ESAACS is owned by ESA and chaired by a Board of trustees. ESAACS accounts will be presented to the Council and to the General Assembly for information (not discussion). Not possible in June 2010 as the year is not finished.

Approval of the 2009 Annual Accounts and 2010 budget
The General Assembly approved the 2009 annual accounts with 95.8% (4.2% abstained) and the 2010 budget with 92.9% (7.1% abstained).

Relieving the Board of Directors, Officers and Auditors of their liability for the 2009 accounts
The General Assembly agreed to grant full discharge to the directors, officers and auditors of their liability for the 2009 accounts.

By-Laws Amendments
Mr. Michel De Bisschop
Last year, the General Assembly suggested to the Board to reconsider point 7.4.4. of the By-Laws

- article 7.4.4. re-election of the members of the Board for one term of two years
- article 7.4.6. maximum term on the Board of Directors is seven years in total, except to allow the President, President-Elect and Past-President to serve their term of office as defined in 7.4.1.

Request for changing article 7.4.4. and allow re-election for two terms of two years to assure continuity on the Board of Directors. The limit of years to serve on the Board of Directors is anyhow limited by article 7.4.6.

Eventual changes to the By-Laws will be presented to the General Assembly 2011 in Amsterdam as there is no urgency to have it changed in 2010.
As some optimisation is needed, the Board decided to create a task force to evaluate the By-laws. This task force will be composed of the First Elected ESA President, Sir Peter Simpson – Current ESA President, Paolo Pelosi – Current ESA Past-President, Johannes Knape – Current ESA Secretary, Andreas Hoeft – Current NASC Chairperson, Hugo Van Aken.

Some questions/concerns were raised by members about: If NASC is part of the revision, there is a danger of the ESA becoming a federation (ESA would become like the old CENA). The Board shares the same concern and wants to keep the individual membership.

Membership
Mr. Michel De Bisschop
The ESA Executive Director reminded the different types of current memberships: Active, Affiliate, Central-Eastern Europe Active, Trainee, Retired.

Two new categories were proposed:
a) ‘Non-Physician Registered Health Professional’ membership at 35 Euro
b) ‘Medical student’ membership at 35 Euro.

This proposal was approved with 90.3% in favor, 3.2% abstained and 6.3% against.

For 2011, the following countries will be granted a reduced member rate: Albania, Armenia, Azerbaijan, Belarus, Bosnia, Bulgaria, Croatia, Czech Republic, Estonia, Georgia, Hungary, Kazakhstan, Kosovo, Kyrgyzstan, Latvia, Lithuania, Macedonia, Moldova, Poland, Romania, Russia, Serbia, Slovakia, Slovenia, Tajikistan, Turkmenistan, Ukraine, Uzbekistan.

Proposal was also made to rename the category ‘EE country’ to ‘reduced fee countries’ with revision by the Board every two years. Proposal was approved with 91.7% in favor, 8.3% against and no abstentions.

President-Elect elections results
Prof. Paolo Pelosi
Prof. Paolo Pelosi announced that Prof. Eberhard Kochs was elected President-Elect (starting in January 2011) during the Council meeting which took place on 11 June 2010.
The Scientific Committee of the ESA strongly recommended to the ESA Board 18 months ago that Euroanaesthesia meetings be opened with a Plenary Lecture in the same way as the major American anaesthetic meetings are. Much thought was given to whether this lecture should be eponymous, but after detailed consideration by the ESA Board under its then President Dr. Peter Simpson, it was decided to call these annual lectures the (first, second, third etc.) ESA Plenary Lecture, in the first instance.

As the retiring chair of the Scientific Committee at that time, its members recommended on the suggestion of Professor Meistelman (Nancy, France) that I should do the first lecture as a pilot study. I decided to tell my audience of the anaesthetists in Liverpool, England, who had been the major influences on my professional career. I wanted to highlight their international scientific contributions, as well as their personal contributions to me. I called my lecture “You'll never walk alone”: the anthem of Liverpool Football Club.

Anaesthesia in Liverpool during World War II was mainly given by general practitioners. RJ Minnitt was one such practitioner. He made two major contributions to modern anaesthetic practice: the introduction of the “gas and air” machine for women in labour; and teaching a local GP, T Cecil Gray, the art of anaesthesia. T Cecil Gray was to become a founding father of modern anaesthetic practice in Europe. The introduction of muscle relaxation and controlled ventilation allowed for the first time very sick patients to be anaesthetised successfully. It led to the development of cardiac, neuro-, and paediatric anaesthesia, and to intensive care (Fig. 1).

Cecil Gray started a school of postgraduate anaesthetic education in 1948 which was to be one of the first in the United Kingdom. He trained a generation of anaesthetists some of whom became professors as far afield as Hungary and Malaysia. One of his first appointments (as a senior house officer!) was to be the legendary G Jackson Rees, one of the founding fathers of modern paediatric anaesthesia. Rees was to teach me how to monitor neuromuscular block during anaesthesia in Europe with “The Liverpool Technique” (1946).

T Cecil Gray was the fourth editor of the BJA and ensured that the next editor was also in Liverpool. J Edmund Riding, the fifth editor of the BJA (for 13 years) was to also become the Dean of the Faculty of Anaesthetists of the Royal College of Surgeons of England in the mid 70’s. He was a sensitive man who strongly encouraged women, including me, to progress in the speciality. He paid fastidious attention to detail in his anaesthetic technique and demanded a similar standard of practice from all his trainees. His MD thesis and clinical research studied the minor complications of anaesthesia in detail.

T Cecil Gray was eager to ensure that all aspects of anaesthetic practice – even veterinary – were to be part of his academic department in Liverpool. He appointed the first veterinary academic anaesthetist who was subsequently to obtain a personal chair, R S Jones. He did extensive animal work across the species on the use of muscle relaxants, especially in horses and dogs. Professor Jones was to teach me how to monitor neuromuscular block (twitch) and supervised much of my early clinical research work. He has been one of my main mentors ever since.

T Cecil Gray also condoned the establishment of some of the earliest intensive care units run by anaesthetists within Merseyside. In my critical care practice, I was taught the importance of respect for all patients and their relatives, however sick or complex, by A A Gilbertson, who set up the first such unit in Liverpool.

I have been fortunate to study the pharmacokinetics of muscle relaxants using many different approaches (non-compartmental, compartmental, population kinetics) in more recent years, primarily with my colleague Dr C J R Parker.

Throughout my medical career, I have “never walked alone”. I have had excellent role models who have taught me many different aspects of our anaesthetic practice. Perhaps the greatest of these was John E Utting, the second Professor of Anaesthesia in Liverpool (1932-1998), whose premature death left a gaping hole in academic anaesthesia in my community. As well as his neuromuscular work, he was one of the first clinicians in the UK to study intraoperative awareness. He first appointed me to my academic post (against T C Gray’s advice), taught me how to write scientifically and to speak in public, and most of all, how to treat every individual with respect whatever their position.

The guidelines for the appointment of future ESA Plenary lecturers have now been drawn up by the Scientific Committee. It is hoped that, in future, international contributors of exceptional repute will give the opening lecture at our Euroanaesthesia meetings. This is another new venture for the ESA which is contributing to the international standing of our society and making Euroanaesthesia meetings truly unmissable! II
DO NOT MISS THE DEADLINES!

ESA GRANTS AND PROGRAMMES

2011 ESA Research Grants Programme

The research grants are intended to promote anaesthesia–related research in Europe, and to encourage anaesthesiologists to extend the frontiers of their practice or understanding. Priority will be given to topics that have no alternative sources of funding.

Applications are sought for the following:

- Project grants of up to € 60,000 each, to support work of up to two years duration.
- Research support grants for amounts up to € 15,000 to assist work in progress or pilot studies.

Applications are invited for the following fields:

- Clinical research
- Experimental research
- Patient safety

These grants will be awarded to start on or after January 1st, 2011.

Grants applications must be received by e-mail (research@euroanaesthesia.org) no later than Friday, 4 September 2010.

For more information and guidelines for grant application please visit the ESA website www.euroanaesthesia.org under the RESEARCH/Research Grants Programme section.

Teaching Recognition Award

The purpose of this Award is to discover an individual with outstanding teaching skills. The award winner will be required to give a total of 3 lectures. One lecture must be presented at the annual Euroanaesthesia congress. The other two lectures will be given on ESA satellite meetings of national societies. The award winner will receive a travel reimbursement for every lecture according to ESA policy. The rest of the travel expenses will be paid by the host departments or congress organisers, if necessary.

Applicants should not be older than 40 years of age. To qualify, applicants must be member of the European Society of Anaesthesiology (ESA). Applicants must submit their Curriculum Vitae as well as an outline of their lecture. Each application must be accompanied by a letter from the applicant’s Chairperson, and a letter of the President of the National Society outlining the teaching qualifications of the applicant. One award is given for applicants from Western European countries. Please submit applications to the ESA Secretariat (ytaward@euroanaesthesia.org) no later than Wednesday, 30 September 2010.

Guidelines

1. Only members of ESA are invited to submit an application.
2. The research can be either basic concept studies or clinical studies in humans and an application of maximum 4 pages (double-spaced A4) should include:
   - Short introduction
   - Study design with objectives, hypothesis and endpoints
   - Data collection and planned analysis
   - Safety parameters when applicable
   - Key references

3. The deadline for application is 1 March 2011.

The research plans will be evaluated and prioritised by the ESA Research Committee. In the year the grant is awarded, the winner will receive free registration to Euroanaesthesia to accept the prize during the awards ceremony.

For more information, please visit the ESA website www.euroanaesthesia.org under the RESEARCH/Research Grants Programme section.

ESA MAQUET ANAESTHESIA RESEARCH AWARD

The European Society of Anaesthesiology and Maquet Critical Care (MCC) are pleased to announce a new research award in Anaesthesiology. MCC’s aim is to support research in a certain focus area every year which may be of importance for perioperative ventilation during complicated anaesthetic procedures. Examples of complicated anaesthetic procedures include paediatric anaesthesia, thoracic anaesthesia, anaesthesia for the obese, or anaesthesia for critically ill patients with acute respiratory failure.

The area of interest for 2011 covers research projects concerning respiratory muscle function during and after anaesthesia.

The research plan of highest interest and importance will be rewarded with €10,000. The aim is to support the development of young or mid-career investigators.

Guidelines

1. Only members of ESA are invited to submit an application.
2. The research can be either basic concept studies or clinical studies in humans and an application of maximum 4 pages (double-spaced A4) should include:
   - Short introduction
   - Study design with objectives, hypothesis and endpoints
   - Data collection and planned analysis
   - Safety parameters when applicable
   - Key references

3. The deadline for application is 1 March 2011.

The research plans will be evaluated and prioritised by the ESA Research Committee. In the year the grant is awarded, the winner will receive free registration to Euroanaesthesia to accept the prize during the awards ceremony.

For more information, please visit the ESA website www.euroanaesthesia.org under the RESEARCH/Research Grants Programme section.
Paolo Pelosi, President of the ESA

Anne Vakkuri, Chairperson of the National Organizing Committee (NOC)

Andreas Hoeft, ESA Secretary

Hugo Van Aken, Chairperson of the NASC

Laura Becker, Winner of the John Zorab Prize (left) with Zeev Goldik, Chairperson of the Examinations Committee (right)

Carmen Gomar (right), Chairperson of the Trainee Exchange Programme Committee, awarding the ESA Trainee Exchange Programme winners: Tatjana Goranovic (left), Ariel Duilio Gonzalez, Jacob Karlsson, Raykhon Khalimova, Göksen Öz

Andreas Hoeft (left), Chairperson of the Research Committee awarding the Research Grant winners: A. Zlotnik (right), Daniel Chappell, Leonie Lang, Jan Stumpner

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

Industrial exhibition

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

European Diploma Awards

Euroanaesthesia 2010, Helsinki, Finland

Anne Vakkuri, Chairperson of the National Organizing Committee (NOC)
Opening Ceremony - YL Male Voice Choir

Best Abstract 1st Prize Winner
From left to right: Benedikt Pannen, Chairperson of the Scientific Committee, Baptiste Bessière and Paolo Pelosi, President of the ESA

Best Abstract 2nd Prize Winner
From left to right: Benedikt Pannen, Chairperson of the Scientific Committee and Niccola Terrando

Best Abstract 3rd Prize Winner
From left to right: Benedikt Pannen, Chairperson of the Scientific Committee, Patricija Ecmovic and Paolo Pelosi, President of the ESA

Abstract presentation session

Networking Evening at The National Museum of Finland

The National Museum of Finland
Accredited centres for training of Anaesthesiologists

Thanks to the work of the ESA HVAP (Hospital Visiting and Accreditation Programme) Joint Committee and visitors, four centres have been accredited as European Centre of excellence for training of Anaesthesiologists. This recognition has been acknowledged during the Awards Ceremony of the Euroanaesthesia Congress of the Euroanaesthesia Congress by Dr. Lennart Christiansson, Chairperson of the HVAP.

<table>
<thead>
<tr>
<th>Centre</th>
<th>Name</th>
<th>Institution</th>
</tr>
</thead>
<tbody>
<tr>
<td>Msida</td>
<td>Prof. Zarb Adami</td>
<td>Department of Anaesthesiology, Mater Dei Hospital, Msida, Malta</td>
</tr>
<tr>
<td>Turku</td>
<td>Prof. Klaus Olkkola</td>
<td>Department of Anaesthesiology, Intensive Care, Emergency Care and Pain Medicine, Turku University Hospital, Turku, Finland</td>
</tr>
<tr>
<td>Genk</td>
<td>Dr. René Heylen</td>
<td>Department of Anaesthesiology, Intensive Care Medicine, Emergency Medicine, Pain Therapy, Range Ziekenhuis Oost-Limburg, Genk, Belgium</td>
</tr>
<tr>
<td>Ljubljana</td>
<td>Prof. Vesna Jankovic</td>
<td>Clinical Department of Anaesthesiology and Intensive Therapy, University Medical Centre Ljubljana, Zaloska, Ljubljana, Slovenia</td>
</tr>
</tbody>
</table>

Willing to be accredited? Visit www.euroanaesthesia.org or contact hvap@euroanaesthesia.org.

Dräger Prize for Intensive Care Medicine – 2010

The Dräger company generously sponsor an award for the best published paper in the field of Intensive Care Medicine.

This year, the award was given to Marcelo Gama de Abreu and the Department of Anaesthesiology and Intensive Care Therapy, University Hospital Carl Gustav Carus, University of Dresden, Dresden, Germany for their paper:

**Variable Tidal Volumes Improve Lung Protective Ventilation Strategies in Experimental Lung Injury**


The paper can be accessed at accessed on the ESA website www.euroanaesthesia.org under the EDUCATION section.
Abstracts 2010

Over 750 abstracts were presented in Helsinki which is more than previous years. The ESA Secretariat had worked hard to improve the experience for presenters and session chairman this year. Improved scheduling and physical separation of the concurrent sessions meant that noise pollution was minimal for most sessions.

The standard of presentation was generally very high, at the session chairs were pleased to see how much effort the young researchers had put into their work. Inevitably, there were some language difficulties, particularly when questions and answers were effectively being translated in and out of three languages.

Good humour, patience and the occasional ad hoc translation solved most of the problems though!

Best Abstract Prize Competition 2010

This year at Euroanaesthesia in Helsinki, 6 abstracts were selected for the Best Abstract Prize Competition. A further 12 were selected for the Best Abstract Runner-up sessions (one was not presented). These abstracts were all of very high quality. The well deserved winner was Baptiste Bessière (France) for an abstract entitled: Nitrous oxide (N2O) persistently alleviates pain hypersensitivity in neuropathic rats: A dose-dependent effect

Best abstract prize competition

1st Prize
Baptiste Bessière (France)
Nitrous oxide (N2O) persistently alleviates pain hypersensitivity in neuropathic rats: A dose-dependent effect

2nd Prize
Niccolo Terrando (USA)
Unravelling the interactions between postoperative infection, surgery, and inflammation in post-operative cognitive dysfunction

3rd Prize
Patricija Ecimovic (Ireland)
Direct effect of sevoflurane on breast cancer cell function in vitro

Jörg Ahrens (Germany)
A novel class of positive allosteric modulators of strychnine-sensitive glycine receptors

Ib Jammer (Norway)
Does central venous oxygen saturation (ScvO2) - directed fluid therapy affect outcome after colorectal surgery? A randomized controlled trial

Aleksander Mathes (Germany)
Molecular effects of melatonin and ramelteon administration after hemorrhagic shock in rat liver

Runners-up abstracts

Sébastien Adamczyk (France)
Sevoflurane postconditioning provides neuro-protection up to 7 days after ischemia/reperfusion via mito

Birgitte Brandstrup (Denmark)
Which goal for fluid therapy during colorectal surgery is followed by the best outcome: Near maximal stroke volume or zero fluid balance? A clinical randomized double blinded multicentre trial

Matthias Grünewald (Germany)
Transoesophageal echocardiography for assessing fluid responsiveness following cardiac arrest and resuscitation

Remy Hakobyan (Armenia)
Prognostic value of intraabdominal pressure in surgical intensive care unit

Dong-Lin Jia (China)
Comparison of postasphyxial resuscitation with 100% and 21% oxygen on function of brain cortex mitochondria in adult rats

Sandrine Lemoine (France)
Bradykinin and adenosine receptors mediate desflurane induced postconditioning in human myocardium: Role of reactive oxygen species

Anu Maksimow (Finland)
Local cortical EEG responses to verbal command after clinical loss of consciousness

Matteo Parotto (Italy)
Effects of circadian rhythm on ventilator-induced lung injury

Tarek Sarhan (Egypt)
Propofol pharmacokinetics in infants

Wolf Stapelfeldt (USA)
Modeling frequency and impact of alerts of the ‘triple low’ condition

Jan Stumpner (Germany)
Desflurane-induced postconditioning against myocardial infarction is mediated by large-conductance calcium-activated potassium channels

Ioannis Zogogiannis (Greece)
Routine vs guided by NIRS selective shunting in carotid endarterectomy. A prospective, randomized, comparative study
The ESA Autumn Meeting

The ESA is delighted to announce its first Autumn Meeting.

This meeting will serve as an annual satellite to the Euroanaesthesia congress. The Society's intention is to extend educational activities to European countries that for practical reasons cannot accommodate meetings of the size of Euroanaesthesia. Lectures will be given by renowned speakers traveling in from all over Europe to share their best practices and knowledge within the field.

The ESA is aiming for an inexpensive 10 CME accredited meeting for a limited number of 600 participants. It will be a two-day programme with 36 presentations given by 19 speakers in two parallel sessions. The two learning track profiles are Practice and Foundations, and the 30 minute presentations will cover state-of-the-art topics of current interest.

Notably, among the speakers at the first of these events are the new ESA President, Professor Pelosi (Italy) and the Chairperson of the Scientific Committee (SC), Professor Pannen (Germany), as well as several chairs and members of the SC subcommittees. The topics cover patient safety, aspects of perioperative monitoring, evidence-based practice guidelines, new techniques in analgesia, management of massive bleeding, news on pharmacokinetics, advances in intensive care and much more. Training aspects will also be highlighted.

We hope that this new annual meeting will be as well received and successful as Euroanaesthesia, and that we can welcome both trainees and already established anaesthesiologists to this inaugural event in the captivating city of Budapest.

Registration Now Open!

The ESA Autumn Meeting will take place on 5 and 6 November 2010 in the beautiful city of Budapest, Hungary. The meeting is CME accredited and space is limited – make sure to register now!

Registration is as low as €80/€150 for trainees/full members from reduced fee countries.

More information:

Further details regarding the online registration, the Scientific Programme, hotels and tours, the venue, etc. are available on the ESA website www.euroanaesthesia.org under the CONGRESSES section.
CALL FOR CENTRES:  
Join the ESA Clinical Trial Network (CTN)!

The ESA Clinical Trials Network (CTN) has selected four observational multi-centre studies to form the initial core activity of the Network. Your hospital may wish to join one of these studies (listed below) as a centre. The first step in this process is to register with the ESA web-based registry of research active centres. This will help to ensure effective communication with you about the first round of CTN studies and also about future observational and interventional trials. The registry will also facilitate web-based data entry for individual studies and is therefore mandatory for participation in ESA-CTN studies.

Eligibility
You are invited to submit contact details on behalf of your hospital in order to become and ESA-CTN centre participating in one of the studies. The contact ‘Centres’ details form can be found on the ESA website (under the RESEARCH/Research Network section) and can be submitted for one of the following four projects that have been selected by the ESA Research Committee:

- European Surgical Outcomes Study (EuSOS)
- Occurrence of Bleeding and Thrombosis during Antiplatelet therapy In Non-cardiac surgery (OBTAIN)
- Incidence and risk factors of chronic post surgical pain: a European follow up study (PAIN-OUT)
- Prospective Evaluation of a Risk Score for postoperative pulmonary Complications in Europe (PERISCOPE)

All members of the CTN Network will be voting members. will be voting members. Non-ESA members working with health care are allowed to participate in the network activities but not to present proposals or to vote.

Process
The contact ‘Centres’ details form must be sent by e-mail to the ESA Secretariat (research@euroanaesthesia.org). Each Principal Investigators (PIs) will then contacts Centres and provide them with additional information.

Contact:
For more information on the CTN, please visit the ESA website www.euroanaesthesia.org under the RESEARCH section/Research Network or contact the ESA Secretariat at research@euroanaesthesia.org.

Website surveys
The ESA receives many requests from individuals wishing to conduct surveys of the ESA members concerning anaesthetic practice. The ESA Board and the Media Committee, have given these much consideration, and the official policy is being finalised. Any surveys which appear on the website will have been reviewed by senior officers of the ESA. ESA members are encouraged to take part in these surveys as the higher the participation the more confidence can be given to the findings. As members will rightly expect, no details identifying individuals will be published.

Surveys will only stay on the website for a limited period, so please check into www.euroanaesthesia.org every so often.
CALL FOR TENDER: Evidence Searching

Invitation to provide evidence searching and appraisal services to support ESA guideline on the management of severe bleeding.

Description
The ESA Guidelines Committee has commissioned a new guideline to help European anaesthesiologists by providing the best available evidence and recommendations for the management of aspects of severe bleeding. The research evidence must be found and appraised. Suitable departments/institutions are invited to tender for this work.

Requirements
The successful institution will have a track record of evidence searching and appraisal. Expertise in the specific subject area is not essential. Collaborations with library or information sciences services within the host institutions will be favourably received.

An outline work plan will be agreed with the chair of the task force before work commences, to include the topics to be searched and the amount of effort required. The work will include searching medical databases, compiling lists of possibly relevant material, and may extend to critical appraisal of published articles and retrieving them for submission to the task force. Written reports and summaries will be required.

Applicants will need to be able to demonstrate a willingness to work closely with the guideline development task force and the Guidelines Committee throughout the project, and respond to the needs of the task force as the work progresses.

Duration
The work is expected to start in August/September 2010 and last for approximately 6-8 months.

Funding available
The budget available for this work is €15,000.

More information
Further information can be obtained from Professor Andrew Smith, Chair of the Guidelines Committee, andrew.f.smith@mbht.nhs.uk

How to apply
Please send a short (maximum 2 sides of A4) summary of qualifications and experience to the ESA Secretariat, Anne Dewaelegenaere, anne@euroanaesthesia.org. Your application will then be considered by the Guidelines Committee.

Newsletter: Editor Vacancy

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.

The ESA Media Committee is seeking to recruit new Editor for its Newsletter.
Anaesthesiologist convicted of research fraud

In June, Scott Reuben, the former chief of the acute pain clinic at Bay State Hospital in Springfield, Massachusetts was sentenced to six months imprisonment for health care fraud.


In addition to the imprisonment, Dr Reuben was required to pay a $5,000 fine, restitution of $361,932 and forfeiture of $50,000.

The case centred on falsified research on multimodal analgesia, particularly non-steroidal anti-inflammatory drugs and COX-2 inhibitors. In May 2009, Anesthesia & Analgesia, the journal most affected, issued retraction notices for 21 articles (10 from A&A), along with accompanying editorials examining what was the current state of knowledge now that Dr Reuben’s research had been withdrawn.

Sources

ESA Traineeship at the ‘Hôpital Femme, Mère et Enfant’ in Lyon, France

CHRISTIAN HÖRNER, GERMANY

When I applied for the ESA fellowship programme in July 2008, I was eager to try something extraordinary. I hoped it would allow me to get to know a different culture, learn another language and gain confidence in a field of anaesthesia I never really felt comfortable with. To improve my skills and knowledge in anesthetising children has been my personal objective for a long time.

When I arrived in Lyon in Southern France, were the room or apartment for the actual fellowship. I perceived the confirmation of the scholarship as both success and commitment. A small dream was about to become true and I had only nine months left to work on my French, which I had not practised since high school.

In May 2009, I had the opportunity for a first test of my language skills as well as a first-glance at the department, where I was going to spend three months at the end of the year. The very competent and friendly chair of the department - Prof. D. Chassard - decided that actions speak louder than words and so I jumped right into practising anaesthesiology. After a short tour around the hospital, I spent the rest of the four days in the operating rooms, getting to know a very friendly and open team at the “Hôpital Femme, Mère et Enfant” in Lyon. Back in Germany a strenuous hassle began to find a room or apartment for the actual fellowship. Although accommodation at the hospital was indicated in the description, and despite much help from the ESA office in Brussels, it took many telephone calls and hours of searching the internet to finally succeed. Time passed in the wink of an eye, and just when cloudy rain replaced summer in Germany in October, I moved to Lyon in Southern France, where the weather was still warm and sunny – just like the people!

A new hospital for a new experience. The “hospital for women, mothers and children” was built very recently and opened in spring 2008. The main building consists of seven floors and contains all paediatric subspecialties except for paediatric neurosurgery and paediatric cardiology. The departments of gynaecology and obstetrics are also included. Two separate operating areas and recovery rooms exist including nine paediatric operating theatres, four gynaecologic operating theatres and one reserved for caesarean sections. About 6000 paediatric operating procedures per year are performed by a total of fifteen anaesthesiologists. General and local anaesthesia are combined in a high proportion of these, providing an excellent basis for my training.

Real team work

I was able to perform many central and peripheral nerve blocks, mainly in infants for urologic, visceral and orthopaedic operations. In general, there was one staff anaesthesiologist responsible for each operating room, which allowed supervision and direct feedback when carrying out new tasks. In addition, at least one experienced nurse-anaesthetist was assigned exclusively to each operating room. Usually, the required tasks of induction of and emergence from anaesthesia were variously divided up between nurses and doctors. This contributed not only to a very cooperative and pleasant atmosphere, but also to a continuous training of all anaesthetic personnel. I experienced the surgeons to be exceptionally patient and found mutual respect and acceptance when time was needed for both anaesthetic and operative procedures. The hospital’s MRI utilisation is an example for the very good organisation of processes: between 9 am and noon 5 to 10 infants underwent MRI scan under general anaesthesia. Two nurses and one anaesthesiologist were responsible not only for anesthetising the children, but also for the post-anaesthetic surveillance in an affiliated area. With regard to theoretical education, I had the opportunity to participate in a three-day course for local anaesthesia in children. This course is organised and held four times per year and is highly recommendable to French speaking anaesthesiologists. Additionally I took part in the almost weekly after-work lectures. It was also my wish to catch a glimpse of anaesthesia in obstetrics and paediatric cardiac surgery. Thanks to the aid of Prof. Chassard, I had the chance to spend one week in each of these specialties and was able to extend my own experience in these fields. Although primarily observing, I received very distinct impressions.

The open discussions with my French colleagues turned out to be both helpful and informative. Looking back on my stay in Lyon, these three months were a full success. Not only was I able to improve my French to a great extent (which is not too difficult, if one starts low enough), but I also saw different anaesthetic material, learned new anaesthetic skills and met amazing people and colleagues in France. I hope these new relationships will contribute to a continued exchange of knowledge and personal experiences. I am looking forward to performing and sharing the acquired skills in my daily routine in Germany. I wish to thank PD Dr. Walther, Prof. Weigand and Prof. Martin, who encouraged me to apply for the fellowship and continued their support throughout my stay in France. Furthermore I would like to thank Dr. Ossam Rhondali, the whole team of anaesthetists and everybody in the operating area for their explanations, help and kindness.

Organises Refresher Courses in Anaesthesiology

Continued medical education to improve your professional practice

Because continuing medical education in anaesthesiology is a lifelong learning process, the CEEA will help you to maintain and improve your knowledge by organising a cycle of six courses covering all aspects of the speciality.

The CEEA courses are a unique opportunity to discuss, and share your experiences. We believe that the most successful approach to learning is to identify key topics, build relationships with colleagues and qualified speakers and to create a forum for learning and reflection.

The CEEA courses are held throughout the year in more than a hundred independent centres across the world. The duration of the course is three days and is limited to 50 participants. Complete the courses at your own rhythm, in the language of your choice, and in the order you prefer.

For more information visit our website: www.euroanaesthesia.org
The European Society of Anaesthesiology organises a two-part examination, the European Diploma in Anaesthesiology and Intensive Care (EDA) that is endorsed by the European Board of Anaesthesiology. Thanks to the assessment of the candidates by an independent board of European Examiners, the EDA helps anaesthesiologists wishing to apply for high quality posts or wishing to practice in any European country. For more information please visit www.euroanaesthesia.org or contact us directly at exam@euroanaesthesia.org.
### Future Anaesthesia Meetings

### 2010

**September, 12 – 16**
ICP 2010 - 14th International Conference on Intracranial Pressure and Brain Monitoring  
**Contact:** [www.icp2010.eu](http://www.icp2010.eu)  
**Tübingen, Germany**

**September, 15**
3rd Interventional Hands-on Cadaver Workshop  
**Contact:** kontakt@painmedicine.pl; cadaverworkshop.info  
**Gdansk, Poland**

**September, 16 - 18**
12th Capital City Conference of the German Society of Anesthesiology and Intensive Care Medicine  
**Contact:** [www.hai2010.de](http://www.hai2010.de)  
**Berlin, Germany**

**September, 22 – 24**
AAGBI Annual Congress  
**Contact:** meetings@aagbi.org; www.aagbi.org  
**Harrogate, UK**

**September, 22 – 25**
SFAR 2010  
**Contact:** info@sfar2010.com; www.sfar.org  
**Paris, France**

**September, 24 – 25**
8th Annual Obstetric Anesthesia Conference  
**Contact:** obanesthesia@mtsinai.on.ca; www.mountsinai.on.ca/education/staff-professionals/cme/2010-obstetric-anesthesia-conference  
**Mount Sinai Hospital, Toronto, Canada**

**September, 24 – 26**
Regional Anesthesia in Children  
**Contact:** www.seattlechildrens.org/healthcare-professionals/education/cme/calendar/  
**Seattle Children’s, Wright Auditorium, Seattle, WA, USA**

**September, 30 – October, 1**
5th LSORA Regional Anaesthesia Workshop  
**Contact:** andrzej.krol@stgeorges.nhs.uk; www.lsora.com  
**St George’s Hospital, London, UK**

**October, 16 – 20**
Anesthesiology 2010  
**Contact:** anmmtg@asahq.org; www2.asahq.org  
**San Diego, CA, USA**

### 2011

**September, 5 – 6**
ESA Autumn Meeting  
**Contact:** secretariat@euroanaesthesia.org; www.euroanaesthesia.org  
**Budapest, Hungary**

**September, 17 - 20**
7th International Conference on Pain Control and Regional Anaesthesia (IPCRA)  
**Contact:** info@ipcra.com; www.ipcra.com  
**Marrakech, Morocco**

**June, 11 – 14**
EUROANAESTHESIA 2011  
**Contact:** secretariat@euroanaesthesia.org; www.euroanaesthesia.org  
**Amsterdam, The Netherlands**

**September, 13 - 15**
22nd International Congress of the Israel Society of Anesthesiologists (ICISA)  
**Contact:** team7@congress.co.il; www.icisa.co.il  
**David InterContinental, Tel Aviv, Israel**

### 2012

**March, 25 - 30**
15th World Congress of Anaesthesiologists 2012 (WCA 2012)  
**Contact:** www.wca2012.com  
**Buenos Aires, Argentina**

**June, 9 – 12**
EUROANAESTHESIA 2012  
**Contact:** secretariat@euroanaesthesia.org; www.euroanaesthesia.org  
**Paris, France**
Symposia
Refresher Courses
Workshops
Industrial Symposia & Exhibition
Abstract Presentations

CME Accreditation
EACCME - UEMS

Deadline abstracts:
December 15th 2010
Online submission:
www.euroanaesthesia.org

Amsterdam, the Netherlands

Euroanaesthesia 2011
The European Anaesthesiology Congress
June 11-14

ESA Secretariat
Phone +32 (0)2 743 32 90
Fax +32 (0)2 743 32 98
E-mail: registration@euroanaesthesia.org