

REPORTS OF SCIENTIFIC MEETINGS

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Third Anaesthesia and Critical Care Symposium. Killarney, Ireland, September 6-13, 1997.

The Third Anaesthesia and Critical Care Symposium, sponsored by the Departments of Anaesthesia of the Royal College of Surgeons in Ireland and the Yale University School of Medicine, was held in Killarney, Ireland, September 6-13, 1997. Associate sponsors were the Anesthesiology Departments of the Mayo Clinic and the Bowman Gray School of Medicine. The meeting attracted Irish anesthetists, practicing in Ireland or elsewhere, United States anesthesiologists with Irish ancestries, and anesthesiologists wanting to learn about practices in Ireland.

This symposium recognized several trends in anesthesiology meetings, including the global nature of anesthesia practices and products, a desire among anesthesiologists to meet in interesting but convenient places, and that participation in the meeting facilitates learning. One third of the 150 symposium attendees formally participated in the program. Irish anesthetists from all major centers attended, including lecturers from the Royal College of Surgeons Dublin, Trinity College Dublin, University College Cork, and University College Galway. Some speakers with Irish backgrounds from outside Ireland included Drs. Kathryn McGoldrick and Terence Rafferty (Yale University), Michael Murray (Mayo Clinic), Anne Rogers (Bowman Gray), Michael Davies (Sydney), and Brian Kavanagh (Toronto).

Symposium participants learned through multiple discussions that all anesthesia providers in Ireland are physicians, and many provide critical care services in hospital intensive therapy units and administer surgical anesthesia. Because the government organizes health care in Ireland, only a defined number of positions are available. The competition for these positions is especially keen, now that the European Union rules apply, and applications of anesthesiologists from outside Ireland are welcomed. The number of anaesthesia openings also is limited because subspecialty care is concentrated in a few centers, e.g., only two hospitals in Ireland have neurosurgery programs, and only four surgeons in Ireland perform thoracic surgery. Thus, some specialty positions become available infrequently. The number of Irish anesthetists achieving F.F.A.R.C.S.I. certification has declined from approximately 35 per yr in the 1980s to 25 per yr at present.

Scientific presentations covered many areas, were organized in several formats, and were of high caliber. Session directors encouraged and facilitated discussions among presenters and attendees. The first day was organized around hour-long refresher course lectures. Dr. Kathryn McGoldrick (Yale) presented "Current Controversies in Ambulatory Anesthesiology." She stated that the use of laryngeal mask airways obviated the need for muscle relaxants, and regional anesthesia may present more disadvantages than advantages. Dr. Anthony Cunningham discussed "Anesthetic Implications of Laparoscopic Surgery." He reported intra-abdominal pressure now is being recognized for complications, so many surgical teams are using low-pressure techniques. Other lecturers included Drs. Paul Barash and

Sorin Brull from Yale, and Richard Prielipp and Anne Rogers from Bowman Gray.

The second day featured talks grouped around clinical questions. Three speakers, for instance, addressed whether obstetric anesthetic management influences outcome. Dr. Jennifer Porter (Dublin) noted the variation in current obstetric anesthetic practices, but recommended regional anesthesia when possible. Maternal mortality has declined from 4 per 1,000,000 live births to 2 during the past decade, and general anesthesia is now associated with a 17-fold increased risk of death over regional anesthesia. Dr. Mary Bowen (Dublin) reported combined spinal-epidural techniques are safe and effective, and Dr. David Hood (Bowman Gray) described how anesthetic management can improve the outcomes of patients with preeclampsia.

A third day was organized around problem-based learning discussions, and a fourth day around controversies in critical care medicine. Most afternoons featured workshops on uses of new drugs, treatments for medical problems, or new practice techniques. Drs. Keith Ruskin (Yale) and Aiden Synnott (Dublin) presented a workshop on information technology and how to use the Internet. They reviewed currently available hardware and software, client-server technology, Universal Resource Locators, and available Internet services. In a hands-on demonstration, they then visited several web sites, including <http://www.asahq.org> and <http://gasnet.med.yale.edu>.

The involvement of Irish anesthetists in patient care outside the operating rooms was apparent from several presentations. Dr. Margaret Coleman (Dublin) discussed her treatment of three children who presented in the emergency department with cyanosis resistant to oxygen administration, brownish blood, and reduced consciousness. She diagnosed familial poisoning with sodium nitrite and reported a dramatic improvement after an intravenous injection of 1 mg/kg methylene blue to treat the methemoglobinemia. Dr. Robert Franklin (Dublin) discussed control of hypoglycemia in a 1-month-old infant with nesidioblastosis. Dr. Paul O'Conner (Dublin) reviewed 22 cases of bacterial meningitis occurring in Beaumont Hospital, Dublin during the past 4 yr. The most common causative organism was *Neisseria meningitidis*, and the mortality rate was 23%. This mortality rate is unchanged over the past two decades despite improvements in intensive care practices.

The primary organizers of the symposium, Drs. Anthony Cunningham (Dublin) and Sorin Brull (Yale), included cultural, recreational, and social activities for interested attendees. On various evenings, delegates and spouses could listen to a piano concert recital by Dr. Jennifer Porter, learn Ceili dancing, compete in a tennis tournament, or hear a local choir sing Irish ballads. Attendees rated the Third Symposium as good as the second in 1993, and hoped there would be a fourth in coming years.

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