The book is composed of a series of articles by the leading figures in anesthesia today. The first article, "The Role of the World Federation of Societies of Anesthesiologists in Global Anesthesia," describes the significant role that this society has played in developing standards for anesthetic care worldwide. A number of additional articles address the methodology, complications, and results of international anesthesia education programs, including: "Anesthesia Teaching in Ghana: A 10-yr Experience," "Pediatric Anesthesia Fellowship Programs Established Through the World Federation of Societies of Anesthesiologists (WFSA): Origins and Perspectives," "Teaching Non-physician Anesthesia Providers in Tanzania: A Movement Toward Sustainable Healthcare Development," "Rwandan Anesthesia Residence Program: A Model of North-South Educational Partnership," and "Multidisciplinary Team Partnerships to Improve Maternal and Neonatal Outcomes: The Kybele Experience." These articles highlight both the successes and shortcomings of each program, providing a realistic vision of their respective impacts.

Two articles, "Successful Volunteering—Matching the Anesthesia Volunteer and the Aid Organization" and "Role of the Anesthesiologists in Global Health: Can One Volunteer Make a Difference," are particularly useful to the anesthesiologist just beginning to explore international medical volunteer opportunities. The articles provide two perspectives on the various considerations in choosing volunteer opportunities, including practical considerations such as the length of commitment and out-of-pocket costs. Both articles emphasize that even one anesthesiologist can make a difference in global medicine—whether in the life of individual patients or in a broader, more systemic manner.

Significantly, the book addresses in great detail the importance of the role of the anesthesiologist in improving health at the international level. It encourages readers to explore volunteer opportunities by providing a framework of knowledge with respect to what other anesthesiologists have accomplished, as well as the tremendous need that exists for further development and improvement.

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RETRACTION

The following article is retracted for ethical misconduct, since no institutional review board approval had been obtained for this human research.

The Influence of Hyperoxic Ventilation during Sodium Nitroprusside–induced Hypotension on Skeletal Muscle Tissue Oxygen Tension: Retraction

Reference

Suttner SW, Lang K, Boldt J, Kumle B, Maleck WH, Piper SN: The influence of hyperoxic ventilation during sodium nitroprusside–induced hypotension on skeletal muscle tissue oxygen tension. ANESTHESIOLOGY 2002; 96:1103–8

ERRATUM

Prevalence of Malignant Hyperthermia and Relationship with Anesthetics in Japan: Data from the Diagnosis Procedure Combination Database: Erratum

In the article that appeared on page 84 of the January 2011 issue, the Results section of the abstract contained three unintended odds ratios and 95% confidence intervals. The Results section should have appeared as follows:

Results: Of 1,238,171 surgical patients undergoing general anesthesia, we identified 17 MH patients. Only one in-hospital death was identified. Men were significantly more likely to contract MH (odds ratio: 3.49; 95% CI 1.14–10.7; $P = 0.029$). No MH patient was found among 19,871 suxamethonium users. The prevalence of MH was relatively high in users of sevoflurane and rocuronium compared with nonusers but was not statistically significant.

Reference

Sumitani M, Uchida K, Yasunaga H, Horiguchi H, Kusakabe Y, Matsuda S, Yamada Y: Prevalence of malignant hyperthermia and relationship with anesthetics in Japan: Data from the Diagnosis Procedure Combination database. ANESTHESIOLOGY 2011; 114:84–90