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VOICE OVER:

Welcome to ASA's Central Line, the official podcast series of the American Society of Anesthesiologists edited by Dr. Adam Striker.

DR. ADAM STRIKER, HOST:

I'm Dr. Adam Striker, the editor of Central Line. Today I am talking to Dr. Jane Moon, critical care anesthesiologist and an anesthesia history buff. She's joining us to discuss the history of our specialty. Dr. Moon, welcome and thanks for joining us.

DR. JANE MOON:

Thank you.

DR. ADAM STRIKER:

So, Dr. Moon, why don't you tell us a little bit about yourself, your work and your studies.

DR. JANE MOON:

OK, well I am a critical care anesthesiologist in Los Angeles. I work mainly at the West LA Veterans Affairs Hospital and I'm also an Assistant Clinical Professor at UCLA. I was a history and literature major in college, then taught high school history for a few years before starting medical school. Uh, but for most of med school and residency I really thought that historical activity might be a past phase in my life, but as a resident, I learned about the Anesthesia History Association and ended up participating in their annual resident essay contest, and that ended up becoming a turning point.

My essay on William James, who was a physician and also a key figure in American psychology, philosophy and religion, ended up winning the contest, which gave me a chance to present at the International Symposium on the History of Anesthesia, and it was there that I first had the opportunity to meet people in the anesthesia history

community. And so, I also was really lucky to be a Fellow at the Wood Library Museum of Anesthesiology the following year, and during my time there, really enjoyed having the opportunity to read hundreds of original letters exchanged between many of the early leaders of American anesthesiology.

And, currently, I continue to be involved with the Wood Library Museum, have also become increasingly involved with my state society, the California Society of Anesthesiologists, History of Anesthesiology Committee. Um, I now serve as Committee Chair. This year, it's also been fun for me to start working with the incredible Dr. George Bause, who's the honorary curator of the Wood Library Museum on brief historical reflections for the journal, Anesthesiology.

DR. ADAM STRIKER:

Fantastic. Um, I do want to delve a little into your role as Chair of History Committee of the California Society of Anesthesiologists, because I, I'm sure many states don't have the ability to have that committee and I find it fascinating and I was wondering if you could just tell us a little bit more about that particular committee as it relates to California.

DR. JANE MOON:

Sure. It's exciting because it's a very new committee, it's just the first year of it's existence, and there were, there was a small group of us originally, uh, that was very interested in celebrating the achievements of anesthesiologists in our state. Um, and so it started out initially as a timeline project creating a timeline for the CSA website that celebrates the scientific advancements made by physicians over the years for the specialty of anesthesia. Um, and then it's blossomed this year into several other different projects, which has been fun for us to do. One is there is a very large collection of original anesthesia letters and documents and images at the UC San Francisco library called the Arthur E. Guedel Anesthesia Collection. And so we've been able to post several hundred original letters and photographs from the collection on to Calisphere, which is the UC system's digital library, which is freely accessible to the public.

Uh, we've also started a new resident essay contest, just for residents in our state, and this year we, we didn't anticipate having so much interest that we actually had nine very good entries on various topics related to the history of anesthesia in our state. A lot of people were interested in the early leadership of female physicians in the field of anesthesiology. Uh, in California, several people accessed the letters that are now on

Calisphere to talk about a sense of deep personal connection with Arthur Guedel. Um, people wrote on George Gregory who, who wrote The Definitive Textbook on Pediatric Anesthesia and discovered the use of use of PEEP or CPAP for Neonatal Respiratory Distress Syndrome.

Um, there was also the trial in the 1930s, the Chalmers-Francis v. Nelson trial, which was the Los Angeles County Medical association's attempt to legalize the practice of nurse anesthesia, so somebody picked up on that and wrote about that, so, we were just really excited to generate interest among the residents and were able to have access to funding from the CSA Foundation for Education to provide the winners with significant, uh, prize of \$1,000. And originally the, the winner was supposed to present at our state society's annual meeting, um, but unfortunately due to the current pandemic, we have, the meeting, uh, the meeting was obviously canceled. And so, it was a little anti-climactic in that sense, but, but yeah, no, it, it's been a lot of fun to, uh, generate interest on the state level with, uh, anesthesia history as well.

DR. ADAM STRIKER:

That's great. I especially love that you're getting residents involved and interested in what I think, we would both agree is an important topic. Um, most of us, patients and anesthesiologist alike, take for granted the idea that we can go in for surgery and experience it without pain. But obviously that wasn't true for most of human history, and given the importance of anesthesia, I was wondering how that specific, I want you to, if you could, talk a little bit more about how you got involved or interested, I should say, in the, uh, long history of anesthesia specifically.

DR. JANE MOON:

Sure. I mean for me it was a natural leap, just cuz I've been so interested in history ever since high school. I do, had an amazing US History teacher who actually just passed away a year ago. He really sparked this love of history when I was a junior in high school. I think for the first time in my life, at that point history was not just about memorizing facts, figures and dates, but about starting to do original research and analysis to craft arguments and to develop a fuller understanding of the human condition.

Um, so my underlying interesting in history naturally led to an interest in the history of anesthesia, which is my vocation. And I would say, I mean, un, undoubtedly anesthesia is one of the most important discoveries of all time. I mean, it's amazing to think about the fact that patients went from avoiding surgery at all costs due to, due to the

excruciating pain involved, to embracing surgery as a treatment option because now we have the ability to be fully unconscious or numb. And I would say anesthesia history is also fascinating because it, it's really when physicians became dedicated to anesthesiology as their chosen specialty, which is a little later in the game in the US. Um, it's really then though that we begin to see a lot of scientific progress and modernization. And so, I think that it's inspiring as an anesthesiologist to reflect on the innovations that anesthesiologists have made over time to advance to field to allow for really complicated surgery and also to fundamentally, to enhance patient safety.

DR. ADAM STRIKER:

Let's uh, broaden this out a little bit. And I'd love to hear your particular take on why you think history matters, in general. You can apply it to our field specifically but in general, why do you think history is so important?

DR. JANE MOON:

Sure. History matters fundamentally because it enriches both the mind and the heart. I would say in terms of the mind, knowing about our past, it really helps us to understand our present more fully. It gives us wisdom to prepare for the future, uh, it helps us to avoid repeating the same mistakes. It allows us to appreciate the full range of the human experience, it gives us a sense of our common humanity. And so I think it enhances our heart by helping us to be more humble and to be more empathetic human beings. I think by allowing us to see both the good and the bad in human history, we're able to celebrate human achievements, but also to relay the core human failures and so I think anesthesia history in particular matters because our work is a large part of our lives. And knowing our history helps us to appreciate what we do on a day-to-day basis.

I know that for a lot of people, knowing the stories of anesthesiologists who worked hard to develop the devices that we simply take for granted today, that can add a very deeply human dimension to our work. I think anesthesia, as a specialty, can sometimes feel a little repetitive and mechanical, and so knowing the history of our profession can give us a sense of wonder, pride, gratitude, a sense of being part of something bigger than ourselves and so a lot of people I've spoken to have said that, you know, this helps them really mitigate their own feelings of burnout or the boredom. There's just more of a sense of inspiration or purpose in what we're doing day-to-day.

I think also for those of us who are in academic medicine and are educators, anesthesia history can also be a useful learning tool. I think when people know more about the

people and the stories involved behind various innovations, that can make us more motivated to learn the science behind things and can help with knowledge retention.

And then, from a legal political perspective, American anesthesiology has, has been a very interesting specialty with a lot of bumps along the road. Um, it took a lot of struggle to, for physician anesthesiology to become accepted by the general medical community, um, and so I think understanding our history also can help us cope with some of the other legal political stresses that can come along with our profession by giving us some insight into the ongoing tension with nurse anesthetists, for example. Or our ongoing battles for independence from the decisions of hospital administrators and insurance company executives, so I think knowing our history really helps us to understand the scientific political legal dimensions of our specialty more fully.

DR. ADAM STRIKER:

Do you feel that the anesthesiology community-at-large could do a better job of appreciating the history as it relates to all the topics you just covered?

DR. JANE MOON:

I think that's definitely true. I think, I mean Americans are, I think Americans as a whole probably have lost, you know, a general cultural sense of our history, but even with the history of our specialty, I, I get the sense that a lot of people who choose anesthesiology as their profession, tend to be naturally more scientifically technically oriented, maybe may not have had a humanities background. Um, and so I don't think that people's natural interest is in anesthesia history, in fact, I think a lot of people, when they hear the words anesthesia history, they tend to shut down and just think that it's a very boring topic. And so I do think that understanding the history of all of these things that I mentioned can, can, yeah, really enhance, um, our day-to-day experience of working as anesthesiologists and give us greater insight into grappling with some of the larger organizational issues that we might have to be dealing with.

DR. ADAM STRIKER:

Well, as you mentioned already, we're in the midst of a remarkable and challenging moment. The COVID-19 pandemic is going on as we speak and um, obviously a lot of healthcare professionals are certainly out of their comfort zone. But based just on what you were saying, what is your opinion on how you see what's happening in the world today in a historical context? Does history have anything to tell us about the moment?

DR. JANE MOON:

DR. JANE MOON:

Sure. I mean, I'm by no means an expert on the history of pandemics, but I think it's natural during a time like this, that's so confusing and so scary, to look to the past for some point of reference. And so I think a lot of people have been thinking back to the 1918 H1N1 flu pandemic lately, which, um, it was misnamed the Spanish Flu just because the pandemic occurred at the same time as World War 1 when a lot of national leaders, including President Woodrow Wilson, at the time intentionally kept quiet about the disease for fear of hurting public morale. And so Spain, at the time, had stayed neutral during the war, had a free media that covered the outbreak and so people falsely assumed that the disease started in Spain.

But kind of getting back to your question, I think it's helpful to look back on that moment in time for a few reasons. I think even though we've, in the past century, developed so much in American medicine and developed things like vaccines, developed techniques of endotracheal intubation, really come to use positive pressure ventilation. None of those things were around back in 1918, but even so we're still in the position today where this is a completely novel virus that nobody expected to take the world in the way that it has, and so we're still having to rely on basic public health measures like physical distancing, societal shutdowns, to deal with this disease at this time. And so I think there are a lot of parallels between 1918 and today for that reason.

I guess there are some things that are somewhat comforting. I mean, I do think that we are objectively in a better position than our predecessors were in 1918. I mean, they were dealing with a World War at the same time that the pandemic was going on, and so life expectancy was really abysmal. I'm sure it was just such a hard time for everybody. I mean people in the US, um, lived until 51 years on average in 1917 and then life expectancy plummeted to 39 years in 1918. Um, now we have tools like, you know, we have critical care, intensive care units, uh, positive pressure ventilation, the ability to develop medications and vaccines at a, at a much faster rate than before. Um, I think the other thing that's comforting to know is back in 1918, here's evidence that social distancing measures actually worked. Um, cities that acted quickly and maintained restrictions for longer periods of time did a lot better than those that didn't.

And then, ultimately, I mean, I guess the greatest comfort is in knowing that the pandemic, while it is bound to be very devastating, we pretty much know that it will be a temporary condition and I think with our modern capabilities, in time, we will have a vaccine. And then things like the ability to conduct blood antibody tests and to treat

patients with convalescent pla, plasma, these are new developments that have definitely been promising. And then, just from the point of view of anesthesiologists, I mean, I think it is inspirational in, in the sense that it's a historic moment. It's the first time that we are on the front lines of a disease with such global reach.

Many of us are serving on COVID intubation teams. Many of us are in the ICU taking care of critically ill COVID patients. And so from a historical perspective, I like to think that we are standing on the shoulders of giants in a way. I mean to treat these severely ill COVID patients who are relying completely on developments that were made by anesthesiologists, like the modern cuffed endotracheal tube, positive pressure ventilation, the concept of PEEP, the creation of ICUs, the modern pulse oximeter, the use of sedatives and paralytics for ventilated patients. For me, it, it gives me some sense of meaning to, to look back and just be appreciative of all, all that anesthesiologists have achieved in the past century.

DR. ADAM STRIKER:

Do you think that this kind of a historical perspective, shall we say, this highlights the basics given all the modern technologies we do have? Kind of brings us back, as you pointed out, to social distancing, hand washing, things like that that we take also for granted, but actually have quite a large impact, and even though we're talking 100 + years since the last pandemic, we're finding that some of these basic methodologies are actually the most effective means at helping us out as a society.

DR. JANE MOON:

Right, no, I completely agree with that. I think it's very humbling and sobering to realize that yes, we do have all these fancy technologies, and yes, many patients' lives will be saved by these technologies. But, but it's very true that fundamentally the, the one thing that will save the greatest number of people is practicing these fundamental public health measures that were proven in 1918 to be the most effective for decreasing mortality during the influenza pandemic at the time. So, so, yes, it's, it's uh, very humbling to realize that as advanced as modern medicine has become, we still really need to focus on basic sanitation and isolation and quarantines and just really rely on these proven public health measures.

DR. ADAM STRIKER:

You also had um, mentioned how much that anesthesiology, uh, as a specialty, has stood on the shoulders of giants, and um, being able to take advantage of the modern

medical technologies that we enjoy now and I certainly have started see it in the, the lay-press now highlighting stories about anesthesiologists that are on the front lines. Do you think that we as a specialty are finally getting the opportunity to, uh, be revealed a little more to the public in terms of the value we bring to the other medical specialties, into the medical field at large? I think a lot of times we've been known about within institutions and within the medical community, but ultimately to the public, we've been somewhat uh, an invisibility. Just curious if you think that this is certainly an, an opportunity for that to be brought to the forefront?

DR. JANE MOON:

I definitely think it's an opportunity for, for anesthesiologists to be brought to the public eye as essential leaders in resuscitation. I think that most people, including my own family members, probably have no idea what intubation means or, or the fact that what we do before surgery involves manipulation of the airway. I mean, I don't think that that's necessarily readily known to a lot of people in the general public, but I, I do think that these articles that are coming out that highlight the experience of anesthesiologists playing this vital role and providing an airway for these patients who are going into respiratory failure, I mean, I definitely think that that can help the reputation of anesthesiologists in the public eye.

DR. ADAM STRIKER:

Dr. Moon, you've written about some fascinating topics including the anesthetic revelation and the role friendship played in improving anesthesia. Um, could you talk a little bit about one or both of those?

DR. JANE MOON:

Sure. Um, well, my most recent research and most of what I focused on as a Wood Library Museum Fellow, was the interplay between friendship and personal ambition in the early leaders' struggle to establish anesthesiology as an accepted medical specialty in the US. And so, I've been quite fascinated by the original correspondence exchanged between many of the early leaders of our specialty. This was during an era when there is no e-mail obviously and so people relied on typed or handwritten letters to communicate with other anesthesiologists in different cities and locations, even across the world.

At the time anesthesiology was still a very small and burgeoning specialty in the US, and so many of these early leaders were friends with each other, um, but they also had

some rivalries because they were incredibly ambitious people and sometimes their own personal ambitions got in the way of group harmony. And so for me, it was just really remarkable to see how they had to struggle through, work through, their own opinions and the differing personalities to commit themselves to the greater good and work together for the greater good which really was their common commitment to the advancement of physician anesthesia.

And so last year, I focused pretty intensely on the correspondence between New York-based anesthesiologist Emery Rovenstine and one of his mentors, who is Los Angeles-based anesthesiologist Arthur Guedel. They were both from Indiana originally and the funny story is that, um, they first met when Rovenstine was just a high school basketball star who got frustrated during a game and intentionally head-butted the referee who picked him up and publicly spanked him, and it turned out that the referee was Arthur Guedel, an anesthesiologist on faculty at Indiana University. And so Rovenstine is a very interesting character. The most prominent lecture at the ASA annual meeting, every year is named after Emery Rovenstine. And I found in, in his letters that he really, um, remained a very competitive and driven person throughout his life. I think his athletic background probably benefited his future leadership in the field of anesthesia greatly. But I was just fascinated by the fact that he really had to learn to, in a way, balance his personal ambition, uh, with his ambition for physician anesthesia. And I think through the course of his life you really figured out a way to, to channel all of his personal ambition into the greater cause of physician anesthesia, and, um, and sometimes he was reprimanded by the anesthesia community and even by the general medical community for appearing to be too personally ambitious.

But yeah, I just found him to be a, a very fascinating character and a remarkable leader. And so when I think about people like this sometimes, sometimes when I feel overwhelmed with things to do, I'm reminded inspired by the examples of their lives. I mean, not that I want to imitate what Emery Rovenstine did, but he, he was a guy who even when he was in his fifties he would sometimes sleep from 10 to 11 p.m., and stay awake from 11 to 4 a.m., 4 a.m. writing papers, then nap again from 4 to 6 a.m. before getting up to go to work. Um, and so I'm just really astounded in general by how hard these early pioneers worked to allow anesthesiology to become an independent medical specialty in the US which it, which wasn't in the beginning of the twentieth century.

DR. ADAM STRIKER:

I just think that's so fascinating. I think it's a good time to circle back and talk about when anesthesia was invented and what people did before that. I, I don't want to take for granted that the audience all knows the history of anesthesia. Many of us are familiar

with the first anesthetics and demonstrations and the early history, but there may be some listeners who aren't familiar and I think we would be remiss not to at least touch on that. Do you want to just tell us a little bit about the early history of anesthesia and the invention?

DR. JANE MOON:

Sure, so the first public display of anesthesia, most people recognize to be October 16th 1846, which was the day when the dentist William Morton, at what's now called The Ether Dome at Massachusetts General Hospital, provided ether anesthesia for the successful removal of a jaw tumor. But there's a lot of controversy actually over who really discovered general anesthesia first. Many people say that Dr. Crawford Long who is actually a surgeon in Georgia, was actually the first to have success in using ether as a general anesthetic on March 30th, 1842. He just didn't publicize it, this until much later, and as you may or may not know, our National Doctor's day, which is on March 30th every year was created in honor of Dr. Long.

Other people say that Horace Wells who's another dentist based in Connecticut, that he was the first to discover general anesthesia because he had successfully use nitrous oxide for tooth extractions in his dental office, but his own attempt to display it publicly at MGH had gone awry. And so most people still credit Morton as the discoverer of general anesthesia.

What I find interesting thought, is that the Chinese actually believe that they were the first to discover a general anesthesia. There was a second century Chinese surgeon named Hua Tuo who is believed to have performed surgery under general anesthesia using a formula that combined wine with various herbal extracts. And then apparently the Japanese also believe that they discovered general anesthesia. There is a Japanese surgeon named Hanaoka, who in 1804 apparently performed a partial mastectomy on a sixty-year-old woman, um, also using a compound of various plant extracts.

DR. ADAM STRIKER:

It is an interesting history. And, um, this is I think a great segue to talk about the Wood Library Museum and you've obviously had a strong interest in the history of anesthesia and worked with the Wood Library Museum. Do you mind telling us a little bit about the museum, it's history, it's mission, it's resources?

DR. JANE MOON:

Sure, so the Wood Library Museum of Anesthesiology began in the early 1930s when Dr. Paul Wood, who was Secretary Treasurer of the New York Society of Anesthetists, became the American Society of Anesthetists and then American Society of Anesthesiologists. He was a collector who presented his own collection of books and artifacts to the Society, um, and now the Wood Library Museum continues to be one of the main foundations supported by the ASA, and is located in the ASA's headquarters building in Schaumburg, Illinois. The mission of the Wood Library Museum is to quote advance anesthesiology by preserving and sharing its heritage and knowledge. And I would say from my own experience with the Wood Library Museum, the resources there are simply incredible. According to the museum registrar, Judy Robbins, there are an estimated 13,000 linear feet of materials in all different formats that document the practice and history of anesthesiology. And so this includes things like books, journals, manuscripts, the ephemera, which is printed material on brochures or manuals, different types of artwork, audio-visual materials, photographs and medical equipment.

Most of the library component at least, of the Wood Library Museum, which is the book, journals, art, digital and audiovisual files, most of that is shelved in the reading room, but there's also a rare books room where some of the material is housed. And then a significant portion of it is actually housed in what's called the Annex. It's, it's a gigantic warehouse space, um, that's pretty close by the ASA headquarters building, that the Wood Library Museum uses for storage. For me, I would say my favorite part of the Wood Library Museum is the archives and it's quite extensive. There are 169 different collections occupying over 4,000 cubic feet and the archives basically include the personal papers of leaders in our field, business records of various anesthesia organizations, and most of the archival materials housed in the Annex.

And then I think what probably interests most people are the artifacts that are present in the Wood Library Museum. And so this includes medical equipment, instruments, anesthesia machines, various bottles of uh, different drugs that were used, all sorts of memorabilia related to our profession. And so again, most of this material is actually in this gigantic warehouse building called the Annex, but a portion of it is displayed in the gallery on the ground floor of the ASA headquarters building.

DR. ADAM STRIKER:

Yeah, I've had the pleasure of visiting it myself when I was there at ASA headquarters last year and it is, it is so interesting. I mean if anybody ever gets the opportunity, it's well worth the visit. But in addition, which I, I hadn't realized as much before but the online resources that anybody can access, are, are just extensive and fascinating. It's a treasure trove of information on, on the website. I've just playing some short snippet

videos for instance. I picked one that looked interesting. Uh, Virginia Apgar, there's a brief 4-minute-ish video just a little bit about her. They have, they have a letter from her and they showcase how she signed her name and she always put a smiley face or she used to put a smiley face right after her name a lot of times and said what sense of humor she had and how personable she was. And I, I just think it's important to really highlight that aspect of learning this history and taking advantage of these resources to remember that all our predecessors were human and they had personalities. I, I think it really helps us connect even more to our history than, than we otherwise might see in a textbook or slide presentation.

DR. JANE MOON:

I totally agree with that and I had no idea that Virginia Apgar used to sign her name with smiley face.

(Laughter)

DR. ADAM STRIKER:

Well, there you go. Well, I'm glad I could, I could provide a little. Well, how did you first learn of the museum and get involved?

DR. JANE MOON:

I didn't know about it in my training days until I first met people at the first anesthesia history conference that I attended and so I do, do have to give a lot of credit to one of my close friends Melissa Coleman who's a pediatric anesthesiologist at Penn State. She really encouraged me to get involved from early on, and then there were several other leaders in anesthesia history like Doug Bacon, Manisha Desai, and Selma Calmes, who encouraged me to apply for the Wood Library Museum Fellowship, and so it was really through the Fellowship that I got connected to the organization and first started using the resources there.

DR. ADAM STRIKER:

Well, tell us how you've used the resources to advance your work.

DR. JANE MOON:

Sure, the librarians at the Wood Library Museum have been absolutely essential for me in my work. I have probably contacted them for help with nearly every project I've been involved with in recent years. In terms of the Rovenstine Guedel letters that I mentioned, I'm still polishing up my manuscript and presented a lot of it's content at the ASA meeting last year, but all of the correspondence that I read when I was delving into the archives of the Fellow at the Wood Library Museum was very useful for the project. And then the librarians also provided me with several relevant images and articles that I could not have found on my own or through my own academic department's resources. Um, I've also been working on a YouTube film on John Severinghaus' life and achievements for the Wood Library Museum and, so, the librarians again, Judy Robins in particular has been indispensable when providing me with biographical materials and photographs related to Dr. Severinghaus.

For our State Society, the California Society of Anesthesiologists, our History Committee had created that timeline I'd mentioned earlier, and the Wood Library Museum librarians has also helped us by providing us with a few very valuable images and then, um, yeah, whenever I am writing a piece, we, there is a CSA History Committee member who wrote a piece on Forrest Leffingwell, who was a former Wood Library Museum Trustee, and past president of the CSA and the ASA. The Wood Library Museum also helped us with some very helpful articles and images related to Dr. Leffingwell.

And then this year as I've started to co-author some of the historical reflections for the journal, *Anesthesiology*, I mean, we're constantly delving directly into the Wood Library Museum's image collection for inspiration. So, as you can see, pretty much, I've relied very heavily on the Wood Library Museum for help with various history projects.

DR. ADAM STRIKER:

Well, how would a member of the anesthesiology community, uh, best be able to take advantage of the resources through the Wood Library Museum?

DR. JANE MOON:

Probably the easiest way is to simply send an email to the librarians or to call the Wood Library Museum. The contact information is readily available on the Wood Library Museum of Anesthesiology website, um, and they're very responsive. There's also a large collection on their website as you found, and anyone is welcome to browse the videos, the timeline, the images on there. There's a whole lot to explore and then it's also a very fun place to visit in person if you're ever in the area, but there aren't any pre-scheduled tours, so I would, I would recommend contacting the librarians ahead of time

to set up a time. And you'll probably get a very informative personal tour by one of the librarians.

DR. ADAM STRIKER:

As we close out here, what overall message would you like to leave the audience with as it pertains to the history of anesthesia, or the study of the history of anesthesia?

DR. JANE MOON:

I would like to say that anesthesia history is a lot more interesting than most people might realize, that there's a lot of practical relevance for practicing anesthesiologists today. And I, as I mentioned before in our discussion about why history matters and why anesthesia history matters, I think understanding our history can really give us a sense of meaning and purpose and inspiration as we go about doing our day-to-day tasks.

So, yeah, I, I really encourage people to take advantage of the incredible resources that we have through the ASA and the Wood Library Museum, or even just to take some time to learn more about the history of the profession cuz it's, it's really fascinating.

DR. ADAM STRIKER:

I couldn't agree more, well stated. Dr. Moon, thank you for joining us today for a fascinating conversation, and I look forward to seeing you very soon.

DR. JANE MOON:

Thank you. Dr. Striker.

DR. ADAM STRIKER:

This is Adam Striker, signing off on another episode of Central Line. Please join us again next time.

(MUSIC/OUTRO)

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