Volunteerism and ASA

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A commitment to volunteerism has been a long tradition among anesthesiologists. For decades, anesthesiologists have traveled to distant places and provided services for surgery, obstetrics and pain management. In the last year alone, many ASA members traveled to Haiti to assist with the various surgeries that were required in the aftermath of the earthquake. We may never know the impact of this work, but in low-income countries these services may have been the only surgical and safe anesthesia option available for many patients in need.

Since the end of the Cold War, the number of non-governmental organizations has increased exponentially. This, coupled with the ease of travel and the generosity of high-income countries, has helped volunteerism grow exponentially.1,2 For many anesthesiologists this has meant a tradition of “giving back,” and for others a dream of one day offering their talents to the world’s underserved.

ASA has maintained a tradition of serving the underserved, and in the last two years has increased its commitment to global outreach. Nicholas Greene, M.D. served for much of his career in Africa and founded the ASA Overseas Teaching Program (OTP), an initiative committed to “teaching the teachers” in Sub-Saharan Africa. In the early 1990s, OTP was approved by the ASA Board of Directors and formalized volunteer opportunities by providing African teaching sites, anesthesia curricula and a process of scheduling anesthesiologists on a monthly basis. The OTP has now morphed into the Global Humanitarian Outreach (GHO) www.asahq.org/gho, with a larger mission, including continuing to support teaching though an ongoing program in Rwanda and by collaborating with academic partnerships committed to teaching and providing services in low-income countries. The GHO will also assist the ASA membership in finding volunteer opportunities with vetted humanitarian organizations and will work with the Committee on Trauma and Emergency Preparedness (COTEP) during disasters and humanitarian crises when anesthesiologists are acutely needed.

Several specialty societies have offered opportunities to anesthesiologists as well. The Society of Pediatric Anesthesia

Above: Dr. Shannon Bradley of Dalhousie University, Halifax, Canada, doing a talk on pre-ecclampsia for about 30 anesthesia technician students in Rwanda.

Left: Dr. Patricia Livingstone, M.D., F.R.C.P.C., a teacher at the OTP Rwanda Program, is seen here with a child getting ready for surgery. Dr. Livingstone is Medical Director of the Global Health Office of Anesthesia, Dalhousie University, Halifax, Canada.

K.A. Kelly McQueen, M.D., M.P.H. is a partner, Valley Anesthesiology Consultants, Adjunct Assistant Professor, Mayo Clinic, Scottsdale.
One of the new residents giving an anesthetic in Butare, supervised by Dr. Livingstone.

(SPA) maintains a detailed website of opportunities with many NGOs (www.pedsanesthesia.org), and the Society for Obstetric Anesthesia and Perinatology (SOAP) endorses Kybele (www.kybeleworldwide.org), a nonprofit organization committed to decreasing maternal and fetal mortality.

The earthquake in Haiti on January 12, 2010 offered a new challenge to ASA and its many committed volunteers. Within hours of the reports of death and injury, many ASA members deployed to Haiti and neighboring Dominican Republic to provide anesthesia and pain relief. Simultaneously, the chairs of COTEP and the GHO were led by then-President Alexander A. Hannenberg, M.D. to provide ongoing information on the crisis to the ASA membership. Together, ASA collaborated with the American College of Surgeons, Operation Giving Back and many of the NGOs on the ground in Haiti to provide a list of needs to the membership who were interested in quickly volunteering much-needed services. This first coordinated effort by ASA provided many needed anesthesiologists to a disaster that required more surgery than previously described directly after the earthquake.

Volunteering, documented and undocumented, is undoubtedly strong within ASA. Many of you volunteer regularly through efforts supported by departments and/or with the many nonprofit organizations to provide safe anesthesia to millions in need. Most of this important global work has been accomplished without recognition from or planning through your national professional organization – the ASA. Recent efforts, directed from the highest stations of ASA leadership, have sought to recognize and expand these efforts. The GHO Committee was established to expand the membership outreach and to formalize the process by which ASA members contributed to disaster relief, humanitarian aid and chronic areas of anesthesia shortage.

The new GHO webpage (www.asahq.org/gho), together with the collaboration between ASA and the American College of Surgeons’ Operation Giving Back, (www.operatinggivingback.org), offers the ASA membership a unique opportunity to participate in global anesthesia care and to aid in the important role anesthesiology plays in humanitarian efforts and disaster relief worldwide.

It is estimated that 2 billion people worldwide have no access to surgical services and that 35 million anesthetics are provided annually without pulse oximetry; many of these also likely provided without oxygen or a qualified provider. Recognition of this global anesthesia crisis – which leads to an unreported number of preventable anesthesia deaths and is contributed to by a limited work force and limited access to important technology and medication – has only recently begun. The GHO seeks to address these global needs through teaching, volunteering and collaboration with the important efforts of the WFSA, the Lifebox Initiative www.lifebox.org and the World Health Organization.

References are available at the back of the online version of this NEWSLETTER at www.asahq.org or by request by e-mailing communications@asahq.org.

Current Residency Cass, CASIF/OTP Rwandan Residency Program.
Left to right (standing): Dr. Claude, Dr. Theoneste, Dr. Christian, Dr. Antoine, Dr. Sylvester; (seated): Dr. Alfred, Dr. Damascene, Dr. Fred and Dr. Isaac.