

## GOVERNING BODY

President	<b>Dr. Usha Saha</b>	9810982588
Secretary	<b>Dr. Radhika Aggarwala</b>	981170063
Treasurer	<b>Dr. S.K. Sinha</b>	9868493597
Editor	<b>Dr. Ranvinder Kaur</b>	9868847557
Ex-President	<b>Dr. Raktima Anand</b>	23238058
Ex-Secretary	<b>Dr. Kirti N Saxena</b>	9968604215
Ex-Treasurer	<b>Dr. Sonia Wadhawan</b>	9968604218

## GOVERNING COUNCIL MEMBER

Advisory Committee	<b>Dr. Baljeet Singh</b>	9718599405
--------------------	--------------------------	------------

## EXECUTIVE MEMBERS

AIIMS	Dr. Ravinder Pandey	9868397817
Apollo Hospital	Dr. Chitra Chatterjee	
Army Hospital (R&R)	Dr. Joy Chatterjee	9868443707
DDU Hospital	Dr. Sandhya Aggarwal	9718990116
G.B. Pant Hospital	Dr. Rajiv Chawla	9718599404
Kailash Hospital	Dr. Anul Gurnanai	9811017238
MAMC	Dr. Divya Jain	9868302387
Max (Saket)	Dr. Raj Tobin	9810507165
National Heart Hospital	Dr. Gaurav Jain	9871270387
Rockland Hospital	Dr. T. Balaswami	9818718092
Safdarjung Hospital	Dr. Virendra Kumar	9891758765
Sir Ganga Ram Hospital	Dr. Anjeleena Kr. Gupta	9818422867
Sunder Lal Jain Hospital	Dr. Mukta Sharma	9873048711
Swami Dayanand Hospital	Dr. Ranjit Chhatterjee	9891257572
UCMS & GTB Hospital	Dr. Ashok Kumar	9868399712

## GOLDCON ISA DELHI 2010- 11

It is a great honour for us at LHMC, SSKH & KSCH, to be given the responsibility of the ISA Delhi for the year 2010-11, after almost 11 years, and even a great honour for my team to be placed at the helm of affairs.



The last annual function of ISA Delhi, was held on 4-5<sup>th</sup> April 2010, at MAMC, when the charge was officially handed over to us.

As you all know this is the 50<sup>th</sup> year since the inception of the Delhi Branch. Let's endeavour to celebrate the Golden Jubilee Meet in April 2011 in splendour.

The 1<sup>st</sup> executive meeting was held on 22<sup>nd</sup> April 2010. Various important issues were discussed as mentioned in the secretary's report.

We are planning to have 11 monthly meets, Ether day celebrations on 16<sup>th</sup> October and Annual day function in April 2011. Also, as per the wishes of all members, monthly news bulletin will be restarted, May issue being the first one.

I request all the HODs / Chairpersons of each department of every hospital in Delhi, to ensure enrolment of all anaesthetists in their department, as life members of ISA. The membership fee is Rs 5050/-

The great news for all PG's is that they can now enrol as Life Members of ISA with all benefits, except voting rights (till they submit passing out certificate to ISA), with the same membership fee.

We hope to get your encouragement & our office will welcome the views & reviews of our esteemed colleagues.

**Dr USHA SAHA**  
**PRESIDENT ISA DELHI 2010-11**

## FROM THE SECRETARY'S DESK

Dear Members,

At the annual conference of ISA Delhi branch held on 3<sup>rd</sup> & 4<sup>th</sup> april 2010, at Maulana Azad Medical College Auditorium, Dr Raktima Anand officially handed over office to Lady Hardinge Medical College. Dr. Usha Saha accepted the office as President for year 2010-2011.



All India Institute of Medical Sciences, Batra Hospital, Sir Ganga Ram Hospital & Lady Hardinge Medical College were the four teams who cleared the preliminary round of quiz & competed in the finals. I am proud to say that Lady Hardinge Medical College won the quiz and was awarded the first prize. The team consist of Dr. Madhur Arora, Dr. Stalin & Dr. Sumit Kalra.

Safdarjung hospital was awarded the "Best Clinical Meet" trophy for the last year. Dr A R Gogia accepted the trophy on behalf of his department.

The general body meeting was held on 4<sup>th</sup> April during the Annual conference. The following decisions were passed :-

- 1) Hospitals wishing to hold the monthly scientific meet must meet the following criteria -
  - a) Have atleast 200 bed strength.
  - b) Have some form of teaching i.e MD, DA or DNB candidates.
  - c) Have an auditorium to hold the monthly meet.
- 2) Several members requested that monthly news bulletin be published. An attempt to do so will be made. No news bulletins are to be sent to outstation addresses.

The first executive committee meeting with the new office bearers was held on 22 April 2010 at 2:30pm at Lady Hardinge Medical College auditorium. The minutes of which are being printed separately as many important decisions for the coming years were taken during the meeting.

Any suggestions & comments from members are welcome. Please also inform us of any CME, Awards, Invitation, Lecture or Programmes held at your hospital so that the information can be sent to the main branch each month.

**Dr. Radhika Agarwala**  
Secretary, ISA Delhi  
isadelhi2010@yahoo.com

## FROM THE EDITOR'S PEN

Dear friends,

Greetings to all from the editor's desk. I take great pleasure in introducing our first news bulletin. The editorial team at LHMC will strive towards making the news bulletin informative, interesting and interactive for you.



**The theme for this year is "ANEASTHESIA & ENVIORNMENT"**

Today, the hot burning issue is environment, pollution, global warming, carbon emission, carbon points & carbon footprints. What is our contribution to all this? Do we as anaesthetists add to the global warming & Green House Gas (GHG) emissions? Can we do society some good? What do we mean by carbon footprints?

CO<sub>2</sub> is the most pervasive of all evil gases and a molecule stays airborne for more than a century. It's tough to separate and quantify each distinct GHG, so scientists commonly use CO<sub>2</sub> to measure the global-warming problems. Carbon footprints are a measure of the total amount of harmful GHG emissions, which absorb heat radiated by the earth and then release it into space. The other more dangerous and long-lasting GHG's include methane, N<sub>2</sub>O and chlorofluorocarbons. The current global atmospheric concentration of CO<sub>2</sub> is 40% higher than levels before the industrial revolution.

This is a very serious issue to which we need to pay some attention. Hence, we have chosen a Theme for ISA Delhi 2010-11 as "Anaesthesia & Environment".

Your views and reviews are welcome.

I hope you will find the first issue of this academic year interesting

Happy reading and have nice a day.

**Dr. Ranvinder Kaur**  
Editor, ISA delhi  
isadelhi2010@yahoo.com

## MINUTES OF FIRST EXECUTIVE MEETING

The first executive meeting of the ISA Delhi branch, 2010-2011, was held on the 22<sup>nd</sup> April, at LHMC auditorium at 2:30 pm. The meeting was attended by 13 executive members, past 2 office bearers and present office bearers under the chairmanship of DR. Usha Saha.

Dr Usha Saha welcomed the members who had made the effort to attend the meeting despite the hot summer afternoon. Various decisions were taken after much deliberation.

1. Monthly meet- a day or date?  
Dr. Jayashree Sood had suggested at the last annual conference, that the ISA meet be held on a fixed date rather than on every 3<sup>rd</sup> Friday of the month, as it is difficult for some anesthetists to come on this day throughout the year. Majority of the executive members were not keen on a change and were of the opinion that those interested in attending meetings would still attend, and members who didn't want to attend will still find a new excuse not to. This issue has been raised time and again so ultimately, it was agreed to "give it a try". The 20<sup>th</sup> of the month was fixed for the monthly meeting. If the day falls on a weekend or a holiday, it would be held on the next working day. It was also decided that if the attendance did not improve or things became chaotic, we can easily revert to the original programme.
2. Complementary registration for the Annual Conference  
As ISA main branch honours members who are above 75 years by making the annual conference registration complimentary, ISA Delhi branch will also do the same for its members who are above the age of 75 years.
3. Ether day celebrations  
Members were asked as to how they would like to celebrate 16<sup>th</sup> October this year. It was unanimously decided that the Ether Day function must be a "celebration" i.e. only fun and frolic. 16<sup>th</sup> October, being a Saturday, function should be started early (2:30 pm) and concluded by 5:30pm, followed by high tea. Members wanted to be free early as the next day is Dusshera this year.
4. ISA Delhi, Annual conference  
The options for the annual conference, Delhi branch, to be held in April 2011 were the first or second weekend. Members preferred the Annual Conference is held on the 1<sup>st</sup> weekend of April. Since it is the 50<sup>th</sup> year(Golden Jubilee), a good venue was agreed upon.. Members all agreed that the delegation fees could be increased up to Rs. 3000 provided the venue warranted it. Most members also felt that the conference bag should be eliminated.
5. All members also agreed to the purchase of a net book (mini laptop) which can be available at each monthly meet and members will be allowed to make corrections/entries regarding change of address, phone no.s, e mail etc. Members also suggested that we get an internet connection through data card for the ISA.
6. A flat has been purchased by ISA Delhi branch since May 2007, the documents to which are with the last office bearers and the keys are with Dr. Kumra. One room has been given for use to the Indian College of Anesthetists (ICA). No one was aware of what the tax implications are for the same & members wanted clarification of this.
7. It was also brought to the notice of members that 25% of the profits of ISA, Delhi, were transferred to the ICA annually. Members felt that ISA and ICA are two different organizations and finances too should be kept separate. Members also wanted to know what the contribution of ICA was to ISA, Delhi. It was also suggested that someone from ICA should be an ex officio executive member of the ISA and vice versa. Since ICA has started enrolling its own members from this year, and is generating its own funds, the 25% transfer of funds from ISA Delhi should be stopped.
8. Dr. Gurnani (Kailash hospital), Dr. Pandey (AIIMS), Dr. Baljit Singh and Dr. Rajiv Chawla (both from G.B.Pant) offered to put in an effort to generate funds and advertisements so as to enable the ISA, Delhi to hold the annual day at a good venue.

The meeting was concluded satisfactorily followed by a group photograph and snacks.

## CONSCIOUS SEDATION

-Dr. Anoop Raj Gogia HOD & Sr. Specialist, Safdarjung Hospital, New Delhi

Conscious sedation is medically controlled state of depressed consciousness that allows the protective reflexes to be maintained, retains the patient ability to maintain patent airway independently and continually and to respond appropriately to physical stimulation or verbal command.

Frequently and erroneously the term conscious sedation is applied when, infact, deep sedation/general anaesthesia is actually being provided. Conscious sedation is thus a part of monitored anaesthetic care, deep sedation and general anaesthesia being other parts.

'Conscious sedation' lies on a dose dependent continuum leading from minimal sedation to general anaesthesia. The marked variation in individual responses to a given dose of anaesthetic drug has led the ASA to avoid the use of the term 'Conscious sedation'. ASA prefers the term Sedation-Analgesia in place of Conscious sedation.

Sedation analgesia can provide pain relief as well as relief of anxiety that may accompany some therapeutic or diagnostic tests. It involves medications for many types of procedures without using general anesthesia, which causes complete unconsciousness.

Conscious sedation can be provided by Physicians, dentists, nurse anaesthetists who must be available for both preoperative assessment and post sedation management and are fully conversant with the drugs used and their potential for respiratory depression.

The goals of Conscious sedation are to provide analgesia, amnesia, and anxiolysis during a potentially painful or frightening procedure. Patients are carefully reviewed before being selected as candidates for conscious sedation and the doctor also goes over the risks, advantages, and alternatives with the patient. An informed consent is taken from the patient before providing Conscious sedation.

The patients should be fasting for 4-6 hrs preoperatively and should be triaged to an appropriate physical status.

Class I: Normally healthy

Class II: Patient with mild systemic disease (e.g. hypertension)

Class III: Patient with severe systemic disease (e.g. CHF), non-decompensated

Class IV: Patient with severe systemic disease, decompensated

Class V: Moribund patient, survival unlikely

Conscious sedation is appropriate for class I and II patients. Patients in class III and higher are suited for operation room.

Some common reasons to use conscious sedation include minor surgical procedures like biopsies, abscess drainage , debridements, hernia repair , cataract surgery etc., burns dressings, endoscopies, radiotherapy , interventional radiology, radiological imaging in paedatric age group, uncooperative patient, psychiatric patients etc.

Conscious sedation should not be used in ASA class IV and higher, where there is lack of support staff or monitoring equipment or lack of experience on the part of clinician, where there is recent (<2hrs) history of ingestion of solid food or large fluid volumes, in children < 1month of age, prematurity, myopathies etc.

The various materials required for providing Conscious sedation and monitoring of the patients include a BP cuff, cardiac monitor, pulse oximeter, sedative and narcotic drugs, intravenous cannula, oxygen mask or