

Editorial

This edition of the UIA has been 2 years in the making, and I thank all the contributors for their patience and fortitude. We had hoped to publish it at the time of WCA in Prague in September last year, but no sooner had the COVID-19 pandemic subsided in one part of the world, then it raged in another part, and clearly our patients come first.

Volume 36 is the penultimate hard copy version of the UIA, as the WFSA Board has decided to continue the journal as an on-line one from now on, with all the peer-reviewed articles being published on the WFSA website. The final hard copy will be our Paediatric edition of the journal.

I feel very privileged to be editing volume 36, as our colleagues from the WFSA Education committee have contributed 11 fantastic Education in Anaesthesia articles. These have been written and peer reviewed by colleagues from all over the world and cover very many aspects of Anaesthesia Education. Faye Evans and Sonia Akrimi have commented as follows:

“Progress towards universal health coverage, and fulfilment of the UN Sustainable Development goals, require sufficient numbers of well-trained healthcare workers globally, and therefore requires investment in Human Resources for Health. This is especially evident within anaesthesia, where the current lack of physician and non-physician anaesthesia providers in many countries globally, significantly prevents the needs for safe anaesthetic care for the entire population being met.

Medical Education is an essential, indispensable component of Human Resources for Health. Without formal training in how to teach, we are, as a medical profession, limited in our ability to train new generations of high-quality specialists equipped with the clinical and non-clinical skills needed to help grow anaesthesia, and develop safer surgical care.

This contribution of Medical Education articles to Update in Anaesthesia is inspired by our belief that for anaesthetic care to develop, both training in medical education and the opportunity to share training ideas and resources must be easily accessible for all who

practice anaesthesia. This edition presents a range of articles developed with anaesthesia practitioners from around the world in mind, equipping each of us with practical tips on how to improve our teaching practice, how to develop our education programmes, and how to share innovations with each other to help advance anaesthesia training globally.

These articles are of course set against the backdrop of the COVID-19 pandemic, which continues to have huge impact on anaesthesia practice and training. Special attention has been given to recognise how the pandemic is shaping anaesthesia training, as well as advice, case studies and examples from medical education literature which help outline how we can continue to adapt to ensure high-quality education continues and grows.

Articles have been authored and reviewed by anaesthetists and educationalists from low, middle and high-income settings, with an ethos of sharing learning between institutions and countries and making examples of good practice easily available to others.”

I thank them both for making this happen.

We then have some fascinating insights into different aspects of the COVID-19 pandemic that have not previously been covered, from different parts of the world. This is followed by a few general topics covered in case reports and letters.

We welcome your contributions to the journal, and if you have any suggestions about the journal or manuscripts that you would like to be published, please do not hesitate to get in touch. You can find contributor guidelines and submit manuscripts directly through our online submission system at <https://resources.wfsahq.org/update-in-anaesthesia/uia-authors-page>

Once again, a huge thank you to all our contributors.

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Faye Evans and Sonia Akrimi

Edition 36 Leads