## CONFERENCES / SEMINARS / SYMPOSIA! BUT HOW MANY ARE ADEQUATE?

It is very heartening that the specialties of anesthesiology, pain management as well as critical care are awakening at a rapid pace. It is in fact an ample proof of dedicated, hard work by so many of our esteemed seniors, towards uplifting these most vital specialties. At one time there were only two fellows from Royal colleges in Pakistan, namely late Professor Ghulam Nabi Rustam and Maj Gen M. A. R. Khan. But the tide of time changed and more and more medical graduates turned to anaesthesiology as the subject of choice for post graduation. Now there are more than five hundred fellows in this specialty in the country and our fellows are found around the globe. The specialty has been established on firm grounds and sister specialties of critical care and pain medicine are in offing. Fellowship in cardiothoracic anaesthesia has started and soon one could refine one's academic career by specializing in paediatric, geriatric, obstetric, neuro-anaesthesia and many, many more. This trend has also been observed by a series of various conferences by anaesthesiology departments of different hospitals from all over the country. Hence, from June 2006 to June 2007 you could enjoy participation in half a dozen of conferences and symposia.

At one hand, it could be called a healthy sign, but on the other it is not without a growing concern about the increased number in any one calendar year. Most participants may feel it hard to attend so many conferences out of their busy schedules. Organizing a conference needs months of preparation by a dedicated team, including dissemination of the information, both to all corners of the country, as well as colleagues in foreign countries, maintaining a continual liaison with the speakers, arranging transport and accommodation for the selected guests, finalizing scientific programme, liaison with the chief guests

and guests of honor, venue selection and confirmation, and last but not the least, the most hectic and troublesome press and publication job.

The standard of the contents of papers presented also needs to be scrutinized more thoroughly. The conference scientific committee must screen the contents of the full paper, and not just rely upon the sketchy abstract submitted by the authors. The sole aim of the conference should be to provide a chance to colleagues in research to present their findings, share their experiences with others, discuss the controversies and invite scientific criticism on ideas and concepts. A conference should offer an opportunity to young scientists to learn by leaps and bounds from senior colleagues, have healthy person to person interaction and remove any of their doubts. It is no fun in listening to textbook style lectures at postgraduate level. We must start emphasizing this aspect now, if we have to retain the credibility of our conferences and symposia in medical circles. The credibility of the papers as well as the conferences needs some tools of judgment to be developed. Even after a paper has been read in a conference, it can be discredited or rated with full or partial credits. Same is the case with the conferences and symposia or seminars. Perhaps Pakistan Society of Anaesthesiologists needs to be revitalized to function as a regulating authority. But it can not materialize without proper legislation by the federal government, giving the society necessary powers and authority with punitive empower ment for the defaulters. Given the present state of affairs of the parliament, this thinking will just be laughed out. But if sanity is to prevail, and I pray that it prevails soon, this is the course we will have to take. PSA is the body that should be at the helm of the affairs, and not the departments of the medical colleges / universities or hospitals. This society should be in charge of all training / teaching activities, as well as national and international level conferences. Only then these activities could earn the required respect and much needed credibility among the international community of anaesthesiologists.

Senior colleagues have the responsibility to come forward with a clear and high head, leaving any bias behind, to salvage this sad state of affairs. The programme of all conferences / symposia etc. should be put up to central executive body of PSA (we need one very badly), who should finalise all of the academic activities for the coming year and even beyond.

The train of academic activities also depicts a colossal amount of money being spent on gala dinners and banquets. The burden has started to show by many donor pharmaceutical and electro medical equipment companies, who have to share the major chunk of the huge expenses. Although they have allocated substantial budgets for these promotional activities, this amount spent is very conveniently transferred by them to the customers. This aspect needs some regulations too. Again the society should take the blame or the credit as the case may be.

It is the need of the hour that all of us come forward and evolve some mechanism to curtail the number of conferences per year as well as the expenses incurred upon these. It is my humble suggestion that there should be only one large-scale national level conference for the three sister specialties per year; we could have an international conference every three or four years. The venues can be mutually discussed. The organizers at less privileged stations must be lent a helping hand by the colleagues at more

effluent ones. This will ensure that the torch of knowledge does light up in all the four corners of our beloved country. It will be a matter of pride for Agha Khan University Medical College to play a major role in organizing an international conference at Quetta or Abbottabad. Sheikh Zaid Postgraduate Institute should happily cooperate and share the responsibility of holding a symposium at Bahawalpur, and why not? Unity is strength. Together we can prevail.

The very important aspect of press and media coverage of the specialty and public awareness needs to be dealt with urgently. Perhaps we could come up with some conferences, symposia or workshops for the public (especially the well-placed personalities from all walks of life) as well. The public awareness about anaesthesiology has improved, but a lot needs to be done. We should set our targets high. The public perceptions about anaesthesia must be fair and unbiased. A lay person must refuse to be anaesthetised by an unqualified and untrained medical officer; rather the patient and the attendants must be more concerned about the availability of a qualified anaesthesiologist as compared to the availability of a trained surgeon. A collective approach is the route to success, and the seminars and symposia offer us a god opportunity to allay the fears, sow the seeds of confidence and trust, and nourish the mutual relationship

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