



ANNUAL REVIEW 2015

IMPROVING PATIENT CARE AND ACCESS TO SAFE ANAESTHESIA



WFSA
WORLD FEDERATION OF SOCIETIES OF
ANAESTHESIOLOGISTS

For **over 60 years** the World Federation of Societies of Anaesthesiologists (WFSA) has been the **only organisation to unite anaesthesiologists** from across the globe.

It is **our mission** to increase access to **safe** anaesthesia and to **improve** patient outcomes around the **world**.

We deliver our mission through **programmes** that tackle the key barriers to safe anaesthesia care.

Our programmes are run in partnership with Member Societies of Anaesthesiology and other organisations that share our objectives. We have official liaison with the World Health Organisation (WHO), and also work with governments, other legislative bodies, surgical organisations, NGOs, hospitals and training centres.

Our impact is felt **globally**, but with **5 billion people** unable to access safe and affordable anaesthesia and surgical care when needed, the work of the WFSA and its Member Societies is **ever more important**.



70%

of district hospitals in parts of sub-Saharan Africa don't have a pulse oximeter

80%

of children in the world's poorest countries are likely to have required surgical treatment by 15 years old

In the world's poorest countries
9 OUT OF 10
anaesthesia departments do not have the equipment to provide a safe anaesthetic to a child



PRESIDENT'S LETTER

Dr David J Wilkinson, President

During 2015 I visited 17 International Congresses and spoke at almost all of them about the WFSA's current and future activities. In January I was able to address the World Health Organisation's (WHO) Executive Board meeting in Geneva in support of the proposed resolution on essential surgery and anaesthesia. In May the World Health Assembly, representing 193 countries, unanimously approved the resolution.

This is the first time that a WHA resolution has prioritised anaesthesia, which provides the WFSA with increased impetus to move forward to change the scenario where five out of every seven people do not have access to essential surgery and safe anaesthesia.

Another fundamental development in 2015 was the increasing interaction with like-minded surgical organisations. There can be little doubt that the messages to governmental agencies are much more powerful when surgeons and anaesthesiologists speak together as a united front, as we do in our normal working lives, to improve patient outcomes.

All of this activity took place during another momentous anniversary as the WFSA celebrated 60 years of existence. On the anniversary of the first public demonstration of ether anaesthesia, in Boston, Massachusetts on October 16th 1846, the WFSA launched the SAFE-T (Safe Anaesthesia For Everybody - Today) campaign with colleagues from all around the world sending their supportive photographs of solidarity as we pledged to improve patient safety around the world.

The WFSA's 60th Anniversary celebration also featured prominently in the October 2015 edition of Anesthesia & Analgesia (A&A) giving me the opportunity to write about the history of cooperation between the International Anesthesia Research Society (IARS) and the WFSA.

All of the WFSA's Committees and their volunteer members have moved forward this year. Strengthened by the appointment of new office personnel to support their activities, we have seen impressive advances in all areas.

As we celebrate the 16th World Congress in Hong Kong in August 2016, people are able to stand up and offer their services to the WFSA by applying to join committees, Council and the Board. Applications have been multiple and the future looks very good although there is increasing financial pressure on our work, which requires urgent intervention to prevent problems emerging in the next few years. If the WFSA's work is regarded as important, as is reflected in our international advocacy and educational activity, then funds will have to be forthcoming to meet our needs.

Once again I cannot speak highly enough about the support and work given by the WFSA Board, Council and Committee members and particularly by our office staff led by CEO, Julian Gore-Booth. Volunteers, often working evenings, nights and weekends after long days spent in hospitals, rarely receive the credit that they deserve, but all of our speciality should be proud of the unswerving loyalty and dedication of the WFSA team.



ADVOCACY

THE GLOBAL HEALTH AGENDA

2015 was a landmark year for anaesthesia and surgery in the global health arena.

The WFSA actively supported the passing of the resolution 'Strengthening emergency and essential surgical care and anaesthesia as a component of universal health coverage' at the 68th World Health Assembly in May 2015.

Additionally, The Lancet Commission released the groundbreaking report: 'Global Surgery 2030' in August 2015 which showed that the number of people without access to safe and affordable surgical care when needed had been vastly underestimated and was actually 5 billion. Similarly The World Bank released 'The Essential Surgery' volume of DCP-3 which again highlighted the scale of the crisis in anaesthesia and surgical care, but also how cost effective it would be to resolve.

As the only global organisation of anaesthesiologists, and with strong links to surgical organisations, official liaison with the WHO and consultative status with UN-ECOSOC, the WFSA is well placed to influence others and has been actively promoting patient safety since its founding in 1955.



G4 REGIONAL LAUNCH LIMA

The WFSA is a member of the Global Alliance for Surgical, Obstetric, Trauma and Anaesthesia Care (G4A), an advocacy-based organisation dedicated to building political priority for surgical care as part of the global development agenda.

The WFSA and Operation Smile hosted the G4A Regional Launch at the CLASA Conference in Lima, Peru in September 2015 which brought surgeons, anaesthesiologists and other specialists together around the shared objective of advocating for the neglected surgical patient.

#KETAMINEISMEDICINE

In December 2015 the WFSA launched a global Ketamine Campaign Hub in response to calls from China to restrict ketamine internationally. When performing surgery in many parts of the world, there is no choice: ketamine is often the only anaesthetic at hand, and the most commonly used. Unlike other anaesthetics, ketamine does not require a reliable electricity supply, oxygen, highly trained staff, or monitoring systems to administer, making it the only safe form of anaesthesia in many poorly resourced hospitals and in conflict and disaster areas. Anaesthesiologists around the world were united in voicing their opposition to ketamine restrictions through the hashtag #KetamineIsMedicine. Anaesthesia providers from over 50 countries took to social media to share their support and stories on ketamine, and were added to the Ketamine Story Map on the WFSA website.



“Ketamine is irreplaceable. After super typhoon Haiyan devastated our city Tacloban, ketamine was one of the few drugs available and we were thankful that we had it in our hospital.”

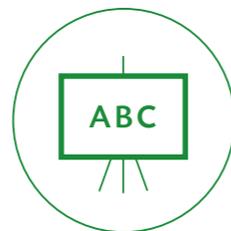
Dr Angelina Gapay, Philippines



SAFE-T CAMPAIGN

The WFSA launched the SAFE-T: Safe Anaesthesia For Everybody - Today campaign on World Anaesthesia Day in October 2015 to raise awareness of the need to increase the availability of safe anaesthesia and surgical care worldwide, with a long term aim of influencing policy change and material response.

The launch event asked anaesthesia providers to 'unite for safe anaesthesia' by taking a photograph of themselves with our banner and upload it onto social media. The response was incredible, with thousands of anaesthesiologists taking part worldwide.



EDUCATION

The WFSA's education programmes are designed to tackle one of the key barriers to safe anaesthesia care worldwide: workforce. With a sustainable, localised approach our programmes are spread across Latin America, Europe, Africa, Asia and the Pacific and improve the skills of thousands of anaesthesiologists every year. This leads to better patient outcomes and brings us closer to achieving our vision of safe anaesthesia for everybody.

DUBAI POST GRADUATE DIPLOMA

The WFSA funds young anaesthesiologists to complete a Postgraduate Diploma of Regional Anaesthesia at the University of Montpellier in Dubai. The Diploma is supported by the Government of Dubai and the Dubai Health Authority and covers regional anaesthesia, analgesia and post-operative pain management delivered through theoretical teaching, hands-on workshops and a clinical attachment.

“ I was given the chance to work on real patients and see, as well as practice under supervision, the administration of the blocks that I had learned during the theory sessions and the hands on workshops.



With the knowledge and skills that I have acquired, I have already started talking to my hospital's authorities about the benefits of regional anaesthesia and as of now, the radiology department has promised to lend us one of their ultrasound machines while we are waiting to acquire a machine of our own, so that we can start administering the blocks as soon as I complete my course ”

Karima Khalid

SCHOLARSHIPS

Since 2008 Baxter Healthcare Ltd has generously sponsored anaesthesiologists from low resource countries to attend WFSA Regional Congresses. The learning gained and networks built during these events have proved invaluable in assisting these future leaders in anaesthesia to progress professionally.

“ I was fortunate to be selected along with 5 other scholars for the WFSA-Baxter award to attend the SAARC-AA congress in Kathmandu last February-March. Personally for me, the opportunity to interact with international delegates and speakers was the most interesting and valuable part.

The opportunity to present my research work to an international platform was a first. I had great company in my co-Scholars from Bangladesh and Sri Lanka, allowing me to learn about the challenges faced and innovations to overcome them.

It gave me an immense confidence boost to share my ideas and work with an international audience. That would be the biggest takeaway. ”

Dr Anuja Pandit, SAARC-AA Scholar, Nepal (February 2015)



FELLOWSHIPS

Fellowships form a central part of how the WFSA supports improved safety and availability of anaesthesiology around the world and they account for the majority of the WFSA's current expenditure.

“ Zambia has a critical shortage of physician anaesthetists, and especially paediatric anaesthesiologists. The need to increase the number of physician paediatric anaesthesiologists is crucial.

The relevance of this Fellowship is huge. I might be the only practicing paediatric anaesthesiologist in Zambia which has a population of 15 million, half of which are aged below 15.

Since returning to Zambia I have been involved in teaching residents and undergraduate students. Some of the

things that I emphasise are preoperative assessment, the need for premedication in some cases, the WHO surgical checklist, and regional techniques.

We are also formulating paediatric protocols and are moving forward in improving the practice of safe anaesthesia and getting people to understand that paediatric anaesthesia is a specialty that needs to be taught well and expanded in order improve access to safe paediatric anaesthesia in Zambia.”



CASE STUDY

Name: Christopher Chanda
Nationality: Zambian
Fellowship Speciality: Paediatrics
Host Institution: University of Nairobi Hospital, Kenya

Dr Chanda is dedicated to improving paediatric anaesthesia in Zambia and will be one of the faculty introducing SAFE: Safer Anaesthesia From Education courses in Zambia next year.

“ A 70 year old gentleman, who was brought in by a very smart wife of around the same age, was totally incoherent and speaking incomprehensibly. He was diagnosed with small cell carcinoma in the right lung, and had multiple secondaries to liver, brain, skin, lymph nodes and bones. He had suffered a fracture to the right humerus, and was in so much pain he was incoherent and could not even respond to his wife calling him.

He was given a supraclavicular brachial plexus block with catheterization for continuous plexus anaesthesia. The relief was immediate and he called his

wife ‘jaanu’ literal meaning ‘my life’ as soon as he saw her. And she just smiled.

That was the moment that I became passionate about pain management. That was the moment that taught me that we cannot control or cure disease, but we can decrease the suffering and improve the quality of life by doing pain management. ”

During her fellowship, Dr Shrestha learned a great deal about pain management and plans to introduce management protocols and assessment tools in her hospital in Nepal.

CASE STUDY

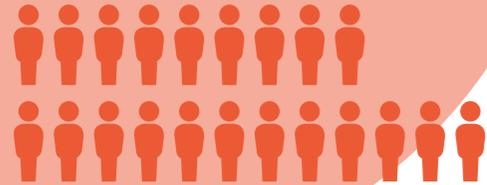
Name: Dr Ninadini Shrestha
Nationality: Nepalese
Fellowship Speciality: Pain Management
Host Institution: Kamineni Hospital, Hyderabad, India

Dr Ninadini Shrestha, an incredibly friendly and positive young anaesthesiologist, is passionate about helping patients and improving pain management.



IN 2015
21 WFSA-BAXTER SCHOLARS
 FROM 16 COUNTRIES WERE
 SENT TO **4 CONFERENCES:**

Nepal: Kathmandu; **Germany:** Berlin;
Peru: Lima; **Niger:** Niamey

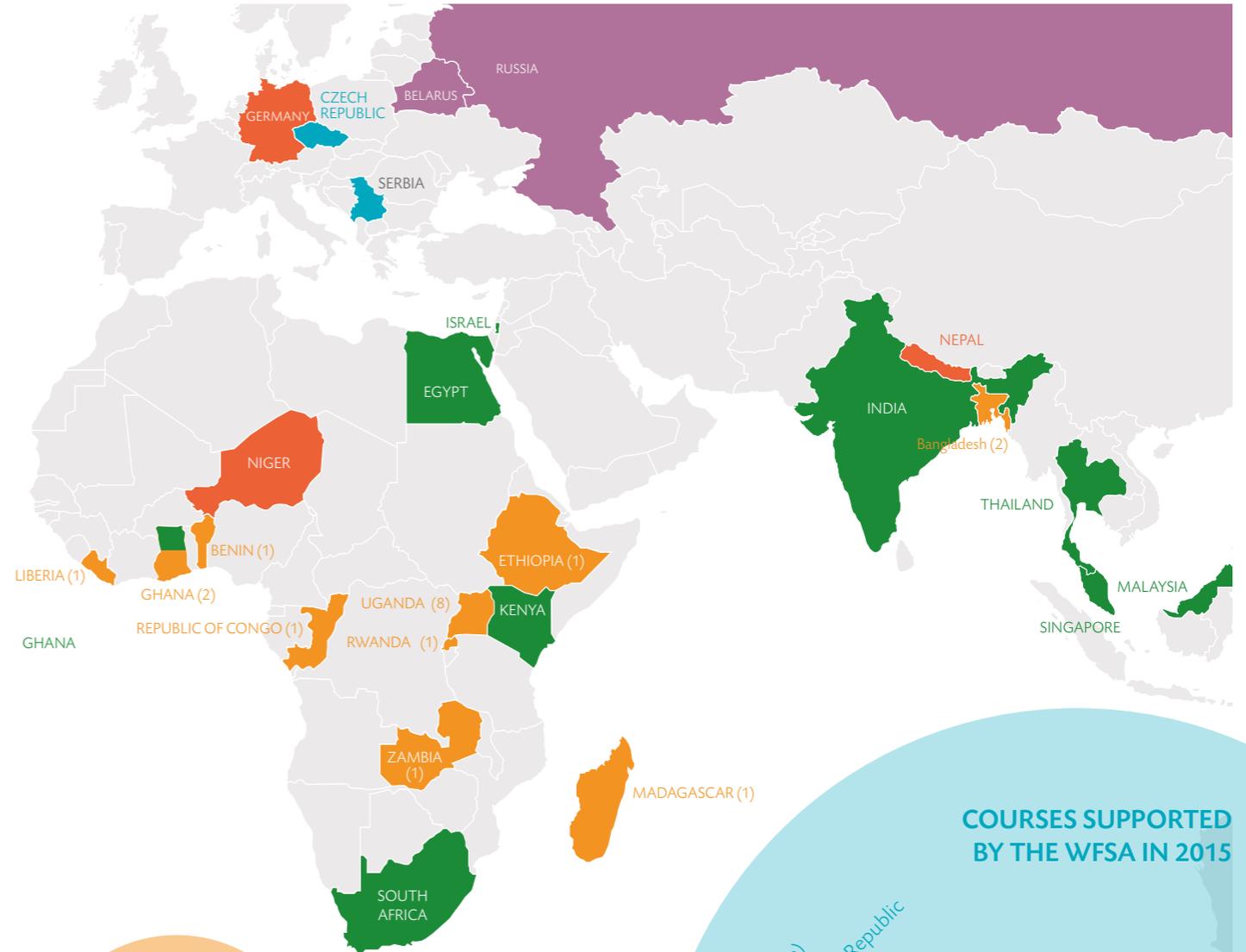


WFSA EDUCATIONAL PROJECTS 2015

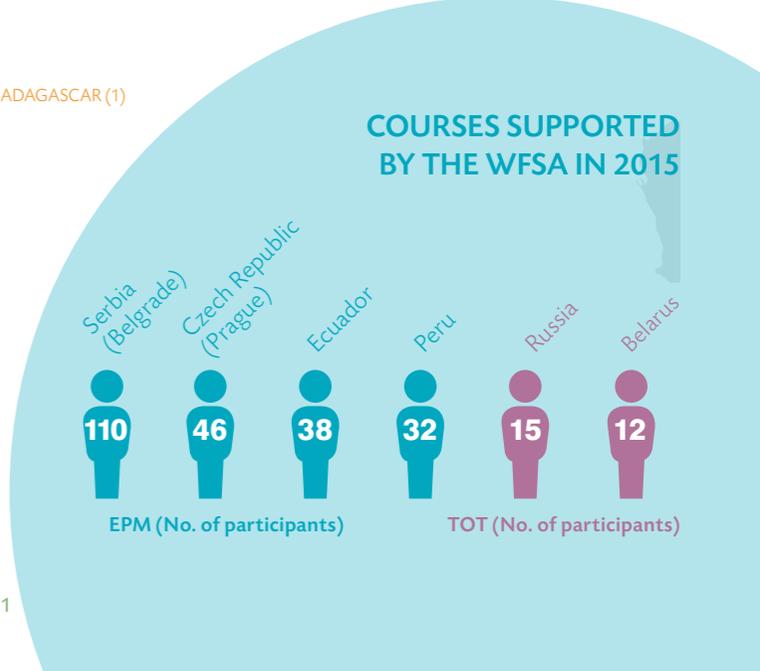
2015 FELLOWSHIP LOCATIONS

- Argentina:** Buenos Aires
- Brazil:** Botucatu; Fortaleza
- Chile:** Santiago
- Colombia:** Bogata; Medellin
- Egypt:** Assiut
- Ghana:** Kumasi
- India:** Hyderabad; Vellore; Coimbatore; New Delhi
- Israel:** Haifa
- Kenya:** Nairobi
- Malaysia:** Kuala Lumpur
- Singapore:** Singapore
- South Africa:** Cape Town; Johannesburg
- Serbia:** Belgrade
- Thailand:** Bangkok

IN 2015 **43 FELLOWS** FROM 27 DIFFERENT COUNTRIES WERE SENT TO **19 HOSPITALS** ACROSS **13 COUNTRIES**



SAFE COURSES
 Countries where the SAFE course has been taught (and the number of courses)





SAFE COURSES

SAFE (Safer Anaesthesia From Education) is a joint project developed by the AAGBI and the WFSA. The 3 day course brings regional and UK faculty together to deliver training to local physicians and anaesthetic officers on how to give the safest possible obstetric and paediatric anaesthetic care. There is a 'train the trainer' component to the course that makes SAFE sustainable, allowing participants to return to their hospitals and teach others the techniques they learned.

“ I worked in a rural hospital in Uganda for 6 months and was inspired to turn my attention to improving anaesthesia in low resource settings. The WFSA is making an incredible difference to the practice of safe anaesthesia across East Africa and beyond ”

Dr Nick Boyd, SAFE Course trainer



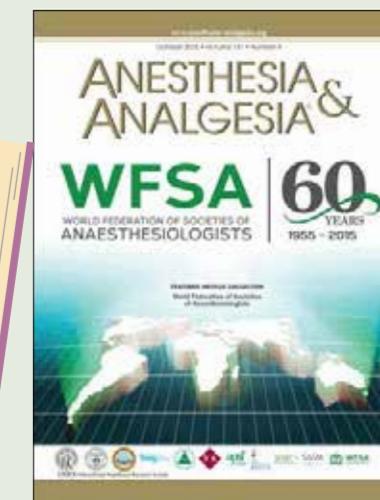
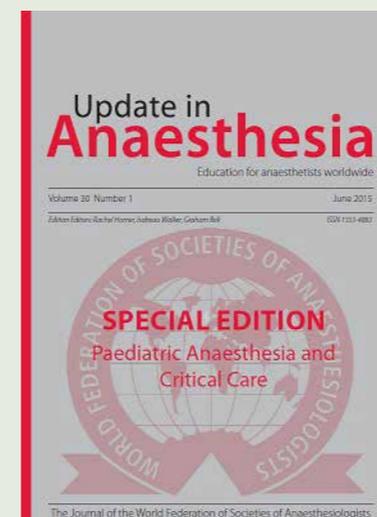
ESSENTIAL PAIN MANAGEMENT (EPM)

Essential Pain Management (EPM) is a multi-disciplinary programme. Run in over 40 countries the programme works with local health workers to improve pain knowledge, implement a simple framework for managing pain and address pain management barriers. The programme encourages early handover to local instructors so that local solutions can be found for local problems.

TRAIN THE TRAINER (TTT)

Train the Trainers (TTT) courses focus on teaching education techniques to teachers in order to develop the teaching skills of young anaesthesiologists and improve the quality of training given to anaesthesiology students.

PUBLICATIONS



UPDATE IN ANAESTHESIA (UIA)

Update in Anaesthesia is the official CME publication of the WFSA. UIA Volume 30, a special Paediatric edition of the journal, was published in July 2015 and was hugely popular with WFSA members. There was a noticeable spike in WFSA web traffic as more than 2,000 people visited the website within hours of the volume's release, and the announcement reached more than 30,000 people on our Facebook page.

 [facebook.com/wfsaorg](https://www.facebook.com/wfsaorg)

ANAESTHESIA TUTORIAL OF THE WEEK (ATOTW)

ATOTW, the WFSA's web tutorial, aims to support anaesthesia education across the globe. In 2015 20 tutorials were published. Many of these were also translated into different language editions. They covered speciality areas including obstetrics, paediatrics, intensive care, neuro-anaesthesia, pain/regional anaesthesia, as well as basic sciences and general topics.

Each ATOTW reaches thousands of anaesthesia providers across high, middle and low income countries making it an invaluable open access resource.

ANAESTHESIA & ANALGESIA

Through a partnership between the WFSA and the International Anesthesia Research Society (IARS), the Global Health Section of Anaesthesia & Analgesia (A&A) was formed in 2014

In the October 2015 edition of Anesthesia & Analgesia, the WFSA's 60th Anniversary celebration featured prominently.



INNOVATION & RESEARCH

Innovation and research in the field of anaesthesiology is vital to improving standards in anaesthesia care globally. Advances in these areas will create innovative equipment for the future, novel drugs to better treat patients, and advance learning methods for safer anaesthesia and effective pain relief in resource poor settings.



“ Innovation is at the core of Baxter’s mission to save and sustain lives so we are delighted to support the advancement of anaesthesia by sponsoring the first ever WFSA Innovation Awards ”
Baxter International, sponsors of the WFSA Innovation Awards

WFSA INNOVATION AWARDS

WFSA Innovation Awards are designed to encourage and support innovation in anaesthesiology that has had, or is likely to have, a positive impact on surgical patient outcomes. The six Innovation Award winners will receive their awards at the World Congress of Anaesthesiologists 2016 in Hong Kong.

INNOVATION AWARD WINNERS:

Dr Christopher Hudson, Dr Viren Naik and Dr Emma J. Stodel, Canada | Dr Neha Singh, India | Dr John Hyndman, New Zealand | Dr Paulin Ruhato Banguti, Rwanda | Dr Aruna Wickramasinghe, Sri Lanka | Dr David Peel, United Kingdom



Dr John Hyndman’s (New Zealand) HYVAN Compact Anaesthesia Machine is designed for use in developing countries where there is reliable electricity and access to volatile agents and soda lime. It is affordable, reliable, simple and able to be maintained by internal hospital workshops

“ Our intention is not to make money but rather to provide a cheap, ultra-reliable anaesthetic machine. The WFSA award has given us the confidence to commission the manufacture of 50 HYVAN’s in New Zealand. We are grateful to the WFSA. This award will make all the difference to the project’s success. ” Dr John Hyndman



Dr Neha Singh (India) created a low-cost head-rest for providing anaesthesia to patients in the prone position in the intensive care unit.

“ Risks when the patient is in this position range from minor soft tissue injuries to catastrophic complications like postoperative blindness. These risks are what inspired me to design this innovative low-cost head rest.

The headrest secures the endotracheal tube, avoiding pressure on eyes and face while keeping the head in the neutral position. It can be repeatedly used and rebuilt at no extra cost as it is designed using waste packing materials. ”

Dr Neha Singh

WFSA RESEARCH GRANTS

The WFSA provides grants worth US\$8,000 each to young researchers from less affluent countries, to help them to study and learn in a research programme typically outside of their home country. Three grants were awarded in 2015 to students who will begin their research projects in 2016.



Dennis Banogtaa Kabiri (Ghana) will conduct a study in all health facilities in the three regions that make up northern Ghana where anaesthesia services are provided for caesarean sections. The project aims to assess the safety of obstetric anaesthesia provided in these regions.



Dr Junsong Gong (China) will be travelling to Canada to study the effects of sevoflurane preconditioning and post-conditioning on reperfusion-induced arrhythmia, and the underlying mechanisms.



Dr Mona Sharma (Nepal) will be travelling to Singapore to study a series of factors relating to obstetric patients that may predict those with difficult airways, and evaluate the feasibility of ultrasound in identifying it.



SAFETY & QUALITY

Safety is an essential component when seeking to improve anaesthesia care globally. The WFSA's Safety & Quality programme promotes the International Standards for the Safe Practice of Anaesthesia around the globe and seeks to break down the barriers that prevent anaesthesia providers from following these Standards.

The professional wellbeing of anaesthesiologists around the world is extremely important to patient safety and is a priority of the Safety & Quality programme. A 2015 multicentre survey of burn-out and working conditions in China showed that the burn-out rate was very high and so the WFSA translated the book 'Occupational Wellbeing in Anaesthesiologists' into Chinese.

The WFSA also turned its attention to the safety of public health initiatives across the world through partnerships and advisory roles.

EBOLA GUIDELINES

The WFSA's Dr Davy Cheng and his team (MEDICI Centre) at Toronto Western Hospital were part of the Emergency and Essential Surgical Care Program (EESC) at the WHO who led an Ebola Virus Disease (EVD) Guideline development for surgical care in patients with suspected EVD infection. They also completed a cross-sectional survey analysis of 31 hospitals in West Africa to examine the impact of EVD outbreak on

surgical team infections, management capacity and surgical access. The study will be finalized and published in 2016.



ICRC

WFSA-ICRC PARTNERSHIP

In 2015 the WFSA and the International Committee for the Red Cross (ICRC) strengthened our partnership to deliver safe anaesthesia for all patients admitted to ICRC facilities worldwide.

The partnership will develop an anaesthesia forum for clinical questions from the field. Additionally, the organisations will work together to update the ICRC's clinical protocols, course materials and content of field sets, all according to international standards, and establish mechanisms for the deployment of qualified anaesthesiologists to the field.

The Committee also created 'War Wounded Kits' that each provide medical treatment for 50 war wounded and include anaesthesia equipment, materials and drugs.



“ In a conflict situation a wounded person has the same rights as everyone else. The WFSA is helping the ICRC set standards, bringing specialists in anaesthesia together with specialists in the field conducting lifesaving humanitarian work. This is a partnership that we value highly ”

Dr Eric Vreede, member of the Liaison Committee.



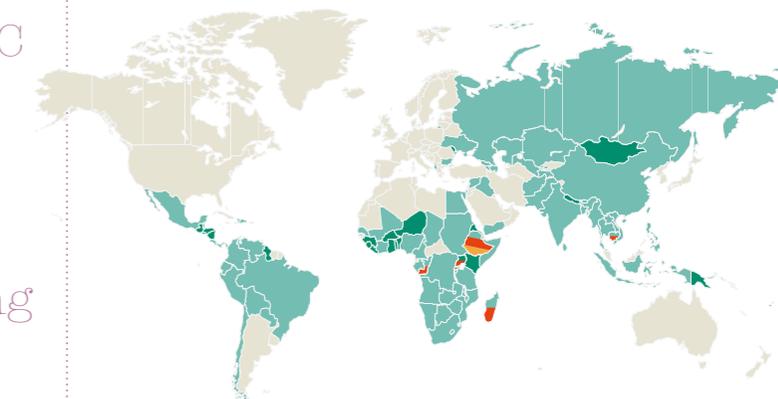
Lifebox was born in answer to a growing healthcare crisis: unsafe surgical care. A unique group of individuals and organisations – including the WFSA – saw that surgical care was an essential and overlooked component of healthcare.

In April 2011, Lifebox – 'saving lives through safer surgery' – launched, and this year turned five.

Lifebox provides essential monitoring equipment by distributing pulse oximeters and trains physicians in the World Health Organization (WHO) Surgical Safety Checklist.

In 2015, with support from WFSA and its members around the world, Lifebox reached an incredible milestone: they put more than 10,000 pulse oximeters into the hands of anaesthesia providers who need them, trained thousands in safer surgical practice, and helped to safeguard millions of patient lives in more than 100 countries around the world.

LIFEBOX AROUND THE WORLD



- Country-wide oximeter distribution and training (oximetry and WHO Checklist)
- Intensive WHO Surgical Safety Checklist training
- Pulse oximeter distribution
- Surgical site infection reduction pilot



WORKING TOGETHER

As a Federation, much of what the WFSA does is based on collaborations between our Member Societies. The WFSA is made up of hundreds of thousands of anaesthesiologists in over 140 countries around the world. Supporting and connecting our members together is at the heart of our Working Together programme and 2015 was extremely successful in achieving these aims.



INTERNATIONAL CONFERENCES

Conferences are a great way to interact as a Federation with colleagues from many different Member Societies. Regional sections of the WFSA hosted great events around the world, allowing delegates, including the WFSA-Baxter Scholars, to improve their knowledge and network with colleagues from countries in their region.

WFSA BOARD & COUNCIL

In 2015 Dr David Wilkinson (President), Dr Gonzalo Barreiro (Secretary), Dr Jannicke Mellin-Olsen (Dep. Secretary), Dr Mark Lema (Treasurer), Dr Alan Merry (Dep. Treasurer), Dr Yehia Khater (Chair of Council), Dr Wayne Morris (Chair of Education), Dr Susilo Chandra and Dr Flavio Veintemilla served on the Board, and along with our Council and Committee members, contributed insights and expertise that made 2015 a very successful year for the WFSA. Council and Committee member profiles can be found on our website.



WFSA 2016 HONG KONG

We will gather in Hong Kong for the World Congress of Anaesthesiologists (WCA) in August 2016. The event is the foremost global gathering of anaesthesia providers interested in learning, networking and engaging in open dialogue on important topics in the field of anaesthesia.

In 2012 the World Congress had more than 9,000 delegates in attendance with lectures and workshops given by some of the most renowned anaesthesiologists in the world. The 2016 WCA Congress will continue to inspire with the biggest and most extensive scientific programme yet.

THE DISTINGUISHED SERVICE AWARD WINNERS

1: Dr Anis Baraka 2: Dr Roger Eltringham
3: Professor John Rowe Moyers 4: Dr Haydn Perndt



1



2



3



4

THE WFSA PRESIDENTIAL AWARD WINNERS

1: Dr Archie Brain 2: Dr Humberto Sainz Cabrera
3: Professor Thara Tritrakarn 4: Dr Tiberiu Ezri



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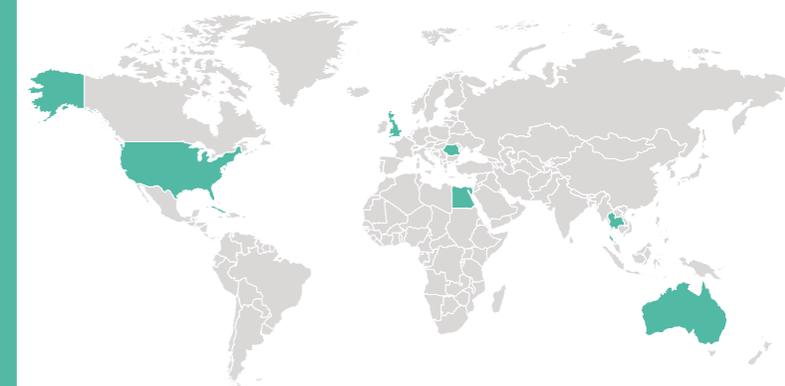
SERVICE AWARDS

The WFSA Service Awards are designed to acknowledge the incredible work done by individuals within our network.

The Distinguished Service Award is given to individuals who have previously served as a WFSA Officer, Council or Committee member or who provided exceptional service in another capacity to the WFSA and the international anaesthesia community.

The WFSA Presidential Award is given to those who have made a special contribution to the art and science of anaesthesiology, have helped promote or establish anaesthesia initiatives anywhere in the world, or served the WFSA, quietly but with particular dedication, and who might not fit the criteria for the Distinguished Service Award.

Full biographies of all eight winners can be found on the WFSA website.





LOOKING AHEAD

The WFSA is gearing up for a momentous year in 2016. We will be working hard through the year to ensure a successful World Congress of Anaesthesiologists in Hong Kong. We will also be scaling up SAFE courses globally, continuing to expand our growing fellowships programme which will celebrate 20 years of training young anaesthesiologists, as well as gather and publish data on the global anaesthesia workforce.

The WFSA will continue to ensure safe anaesthesia is a part of the global health agenda and endeavour to close the gap for the 5 billion people who lack access to safe and affordable anaesthesia.

WORKFORCE SURVEY

The WFSA is gathering data using a workforce survey on global numbers of anaesthesiologists and other anaesthesia providers, the survey will act as a one of a kind source of information, mapping anaesthesiologists and potentially providing information never seen before. It will enable targeting of WFSA assistance and WHO planning in the future, as well as provide vital data to identify regional and global trends.

SAFE COURSE EXPANSION

Expanding the SAFE Course will be an exciting highlight to our Education programme in 2016.

The WFSA and the AAGBI (Association of Anaesthetists of Great Britain & Ireland) were awarded two grants totalling £295,412 through the Tropical Health Education Trust (THET) and UK Department for International Development's Health Partnership Scheme to develop obstetric and paediatric anaesthesia in East Africa through the SAFE course. These courses will run in Uganda, Kenya, Zambia, Malawi and Ethiopia throughout 2016.

“Helping to spearhead the roll out the SAFE Obstetric course series throughout Uganda has been greatly rewarding for me from a professional and personal viewpoint. I have learned that the key to the success of any long-term project is based upon a strong partnership with the local champions. I certainly look forward to staying involved as the project continues to grow in other low-resourced countries around the world ”

Dr Maytinee Lilaonitkul, SAFE Course Trainer





PARTNERSHIPS

SUPPORT & PARTNERSHIPS

The WFSA is extraordinarily grateful to all of our Member Societies, Partners, Donors and Volunteers who supported us in 2015. Their time, money and expertise enables us to continue our mission to improve patient care and access to safe anaesthesia for all.

MEMBER SOCIETIES

The support of our 130 Member Societies is essential to our work. We are honoured to be able to represent this truly global federation and thank each of our members for their investment in colleagues and patients worldwide.

VOLUNTEERS

The WFSA is supported by an extraordinary network of thousands of volunteers who generously and graciously dedicate their expertise and time to our Board, Council, Committees and the delivery of our programmes. They are the bedrock of what we do and we could not exist without them.

INDIVIDUAL DONATIONS

The WFSA is very fortunate to receive donations from generous individuals who recognise the importance of our work. We are enormously appreciative of this support and look forward to continuing our engagement with you over the coming year.



PARTNERSHIPS

Support from our partners, in particular Baxter and the Air Liquide Foundation have enabled the WFSA to expand our vital education and training programmes around the world. We thank these partners for their continued financial support and dedication to safe anaesthesia and global health.

This year, together with the AAGBI, we were also delighted to receive support from Tropical Health Education Trust (THET), for the expansion of the SAFE Obstetric and Paediatric training courses in East, Southern and Central Africa..



FINANCE

WFSA income is derived from member subscriptions, interest, and donations. In certain years income is also derived from the World Congress of Anaesthesiologists which shares a portion of any profit with the WFSA.



The majority of WFSA's expenditure is allocated across Education, Publications and other grants, as well as support costs such as salaries, legal fees, accountancy, and investment fees. Total Expenditure in 2015 was US\$988,940* with the shortfall being covered by reserves.



RETURN ON INVESTMENT:

Conservative estimates of the value of volunteer time utilised by the WFSA mean that the WFSA council and committee members contributed over \$1,000,000.00 of professional time in 2015. All programmes are delivered by physicians and trainers who provide their time free of charge and are organised by our Council and Committees, made up of highly experienced and renowned anaesthesiologists, on an entirely voluntary basis. The teachers/mentors at WFSA teaching centres donated an estimated \$2,000,000.00 in time in 2015.

The WFSA provides a return of over \$10 for every \$1 invested in our mission.

*These are non-audited figures. A copy of the audited accounts can be requested from the Secretariat. The value of volunteer time made available to the WFSA is an estimate and is not included in the accounts.

MEMBERS

ALBANIA: Albanian Society of Anaesthesia and Intensive Care
ALGERIA: Société Algérienne d'Anesthésie
ANGOLA: Associação de Anestesia da Republica de Angola
ARGENTINA: Federación Argentina de Asociaciones de Anestesia, Analgesia y Reanimación
AUSTRALIA: Australian Society of Anaesthetists
AUSTRIA: Österreichische Gesellschaft für Anästhesiologie, Reanimation und Intensivmedizin
BANGLADESH: Bangladesh Society of Anaesthesiologists
BELARUS: Belarusian Society of Anaesthetists and Experts in Resuscitation
BELGIUM: Society for Anesthesia and Resuscitation of Belgium
BENIN: Société d'Anesthésie-Reanimation du Benin
BOLIVIA: Sociedad Boliviana de Anestesiología, Reanimación y Dolor
BOTSWANA: Botswana Society of Anaesthetists
BRAZIL: Sociedade Brasileira de Anestesiologia
BRUNEI: Society of Anaesthesiologists, Brunei Darussalam
BULGARIA: Bulgarian Society of Anaesthesiologists
BURKINA FASO: Societe d'Anesthésie Reanimation et Medecine d'Urgence du Burkina (SARMU-B)
CAMBODIA: Cambodia Society of Anaesthetists
CAMEROON: Société Camerounaise d'Anesthésie Reanimation
CANADA: Canadian Anaesthesiologists' Society
CHILE: Sociedad de Anestesiología de Chile
CHINA: Chinese Society of Anesthesiology
CHINESE TAIPEI TAIWAN: Taiwan Society of Anaesthesiologists
COLOMBIA: Sociedad Colombiana de Anestesiología y Reanimación
CONGO: Société Congolaise d'Anesthésie Réanimation Urgences
COSTA RICA: Asociación de Médicos Anestesiólogos de Costa Rica
CROATIA: Croatian Association of Anaesthesiology and Intensive Care Medicine
CUBA: Sociedad Cubana de Anestesiología y Reanimación
CZECH REPUBLIC: Czech Society of Anaesthesiology and Intensive Care Medicine
DENMARK: Danish Society of Anaesthesiology and Intensive Care Medicine
DOMINICAN REPUBLIC: Sociedad Dominicana de Anestesiología
ECUADOR: Sociedad Ecuatoriana de Anestesiología
EGYPT: Egyptian Society of Anaesthesiologists
EL SALVADOR: Asociación de Médicos Anestesiólogos de El Salvador
ESTONIA: Estonian Society of Anaesthesiologists
ETHIOPIA: Ethiopian Society of Anaesthesiologists
FINLAND: Finnish Society of Anaesthesiologists
FRANCE: Société Française d'Anesthésie et de Réanimation
GEORGIA: Georgian Society of Anesthesiology and Critical Care Medicine
GERMANY: Deutsche Gesellschaft für Anaesthesiologie und Intensivmedizin e.V. (DGAI)
GHANA: Ghana Anaesthetist Society
GREECE: Hellenic Society of Anaesthesiology
GUATEMALA: Asociacion Guatemalteca de Anestesiología, Reanimación y Tratamiento del Dolor
HAITI: Société Haitienne d'Anesthésiologie
HONDURAS: Sociedad Hondureña de Anestesiología, Reanimación y Dolor
HONG KONG: Society of Anaesthetists of Hong Kong
HUNGARY: Hungarian Society of Anaesthesiology and Intensive Therapy
ICELAND: Icelandic Society of Anaesthesiology and Intensive Care Medicine
INDIA: Indian Society of Anaesthesiologists
INDONESIA: Indonesian Society of Anesthesiologists and Intensive Therapy
IRAN: Iranian Society of Anesthesiologists and Critical Care
IRAQ: The Iraqi Association of Anesthesia And Intensive Care And Pain Medicine
ISRAEL: Israel Society of Anesthesiologists
ITALY: Società Italiana di Anestesia, Analgesia, Rianimazione e Terapia Intensiva
IVORY COAST: Société Ivoirienne d'Anesthésie-Réanimation
JAMAICA: Jamaica Anaesthetists' Association
JAPAN: Japanese Society of Anesthesiologists
JORDAN: Jordan Society of Anaesthesia and Intensive Care
KENYA: Kenya Society of Anaesthesiologists
KINGDOM OF SAUDI ARABIA: Saudi Anaesthesia Society
KOREA: Korean Society of Anesthesiologists
KOSOVO: Association of Kosovar Anaesthesiologists
KUWAIT: Kuwait Society of Anaesthesiologists
LAO: Lao Society of Anesthesiologists
LATVIA: Association of Anaesthesiologists-Reanimatologists of Latvia
LEBANON: Lebanese Society of Anesthesiologists

LIBYA: Libyan Society of Anaesthesia, Intensive Care and Resuscitation
LITHUANIA: Lithuanian Society of Anaesthesiology and Intensive Care
MACEDONIA: Macedonia Society of Anaesthesiologists
MALAYSIA: Malaysian Society of Anaesthesiologists
MALDIVES: Maldives Anaesthesiologists Association
MALI: Société d'Anesthésie, de Réanimation et de Médecine d'Urgence du Mali
MALTA: Association of Anaesthesiologists of Malta
MAURITIUS: Association of Anaesthesiologists of Mauritius
MEXICO: Federacion Mexicana de Colegios de Anestesiologia A.C.
MICRONESIA: Micronesia Anesthesia Society
MOLDOVA: Society of Anaesthesia and Reimatology of the Republic of Moldova
MONGOLIA: Mongolian Society of Anesthesiologists
MONTENEGRO: Montenegro Anaesthesiologists' Society
MOROCCO: Moroccan Society of Anesthesiology and Intensive Care (SMAR)
MOZAMBIQUE: Associação de Anestesiologistas de Moçambique
MYANMAR: Myanmar Society of Anaesthesiologists (Myanmar Medical Association)
NEPAL: Society of Anaesthesiologists of Nepal
NETHERLANDS: Nederlandse Vereniging voor Anesthesiologie
NEW ZEALAND: New Zealand Society of Anaesthetists
NICARAGUA: Asociación Nicaragüense de Anestesiología y Reanimación
NIGER: Societe Nigerienne d'Anesthésie, de Réanimation et de Medecine d'Urgence
NIGERIA: Nigerian Society of Anaesthetists
NORWAY: Norsk Anestesiologisk Forening
PACIFIC ISLANDS: Pacific Society of Anaesthetists
PAKISTAN: Pakistan Society of Anaesthesiologists
PALESTINE: Palestine Society of Anaesthesia & Intensive Care
PANAMA: Sociedad Panameña de Anestesiologia
PAPUA NEW GUINEA: Society of Anaesthetists of Papua New Guinea
PARAGUAY: Sociedad Paraguaya de Anestesiología
PERU: Sociedad Peruana de Anestesia, Analgesia y Reanimación
PHILIPPINES: Philippine Society of Anaesthesiologists
POLAND: Polish Society of Anaesthesiology and Intensive Therapy
PORTUGAL: Sociedade Portuguesa de Anestesiologia
ROMANIA: Romanian Society of Anaesthesia and Intensive Care
RUSSIA: Russian Federation of Anaesthesiologists and Reanimatologists-
RWANDA: Rwanda Society of Anesthesiologists
SENEGAL: Société Sénégalaise d'Anesthésie-Réanimation et de Médecine d'Urgence
SERBIA: Serbian Association of Anaesthesiologists and Intensivists (SAAI)
SINGAPORE: Singapore Society of Anaesthesiologists
SLOVAK REPUBLIC: Slovak Society of Anaesthesiology and Intensive Medicine
SLOVENIA: Slovenian Society of Anaesthesiology and Intensive Care Medicine (SSAICM)
SOUTH AFRICA: South African Society of Anaesthesiologists
SPAIN: Sociedad Española de Anestesiología, Reanimación y Terapéutica del Dolor
SRI LANKA: College of Anaesthesiologists and Intensivists of Sri Lanka
SUDAN: Sudanese Society of Anaesthesiologists
SWEDEN: Swedish Society for Anaesthesiology and Intensive Care Medicine
SWITZERLAND: Schweizerische Gesellschaft für Anästhesiologie und Reanimation
SYRIA: Syrian Society of Anesthesiologists
TANZANIA: Society of Anaesthesiologists of Tanzania
THAILAND: Royal College of Anesthesiologists of Thailand
TRINIDAD AND TOBAGO: The Trinidad & Tobago Anaesthetists Association
TUNISIA: Société Tunisienne d'Anesthésie et de Réanimation
TURKEY: Turkish Anaesthesiology and Reanimation Society
UGANDA: Association of Anaesthesiologists of Uganda (AAU)
UKRAINE: Ukrainian Society of Anaesthesiologists
UNITED ARAB EMIRATES: Society of Anaesthesia, Critical Care and Pain Medicine of United Arab Emirates
UNITED KINGDOM: Association of Anaesthetists of Great Britain and Ireland
UNITED STATES OF AMERICA: American Society of Anesthesiologists
URUGUAY: Sociedad de Anestesiología del Uruguay
UZBEKISTAN: Uzbekistan Society of Anaesthesiology and Intensive Care
VENEZUELA: Sociedad Venezolana de Anestesiologia
VIETNAM: Vietnam Society of Anaesthesiologists
WEST AFRICA FRANCO: Société d'Anesthésie et de Réanimation d'Afrique Noire Francophone (SARANF)
ZAMBIA: Society of Anaesthetists of Zambia
ZIMBABWE: Zimbabwe Anaesthetic Association

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