Anaesthetists Seeing Through the Economic Crisis of Sri Lanka

Wijesuriya N. *1

1 Consultant Anaesthetist, Colombo North Teaching Hospital, Sri Lanka

Dear Editor,

Sri Lanka is currently facing the worst economic crisis since its independence in 1948. Medical services immediately felt this in the first quarter of the year as essential drugs, consumables and other essential items were in short supply as the government could not secure foreign currency.

COVID-19 pandemic made a large impact on anaesthesia, intensive care and pain services due to shortage of resources and staff infection rates. Health services were just recovering when this major economic crisis along with political and social turmoil hit the country. Fuel shortages have deepened the crisis by affecting staff attendance, delaying release and transport of medical items from the customs and the Medical Supplies Division (MSD) and restricting patient attendance.

College of Anaesthesiologists and Intensivists of Sri Lanka stepped forward to find ways to minimise the impact of this crisis on anaesthesia, intensive care and pain services in the country. The college established a crisis management committee. We understood the need for identifying available and required stocks, identifying donors and communicating with them while increasing the efficiency of use of available resources.

We closely collaborated with the Ministry of Health, MSD and NMRA (National Medicines Regulatory Authority) and obtained details of monthly requirement, available stocks in the MSD, institutional stocks and items with short supply. It was not an easy task to identify items related to our practice, since the lists were not grouped, and it was a tedious task to go through multiple lists obtained from the MSD.

The crisis management committee coordinated with the provincial council members of the college of Anaesthetists who liaised with consultant anaesthetists of respective hospitals to find out requirements using online forms.

We established a separate account “Heal Sri Lanka” and commenced a donation campaign to supply essential medications to needy hospitals. Many local and expat individuals and organizations contributed towards this project. College succeeded in collecting SLR 3,545,297.25 to this account which were used to purchase many essential drugs such as atracurium, potassium chloride, noradrenaline, dobutamine, amiodarone and essential equipment such as spinal needles and catheters. We also received direct supplies of drugs worth USD 25,325.70 (SLR 9,117,000) from generous donors from the UK, US and Hong Kong. The NMRA was extremely efficient in fast tracking the registration process of unregistered drugs coming through donations. Our own anaesthetists working in the UK worked tirelessly with Sri Lanka Medical and Dental Association in the UK and the High Commission to collect funds and send anaesthetic consumables to the college. All these donations were distributed to all provinces in a fair and transparent manner.

*Correspondence: N. Wijesuriya

E mail: nilm314@gmail.com

https://orcid.org/0000-0003-3248-6650

Received: 29/08/2022
Accepted: 02/09/2022

DOI: http://doi.org/10.4038/slja.v30i1.9105
Another aspect considered was to reduce wastage. Due to advances in anaesthesia related specialties, health expenditures have escalated in the recent past. Ever increasing cost of anaesthesia drugs and consumables have important implications in the resource limited countries. One fourth of all operating room waste is attributed to anaesthesia related material. The focus was to minimise wastage throughout the perioperative period. A large sum of money is wasted on unnecessary preoperative investigations and repeating the investigations on a routine basis. The laboratory services were struggling to perform routine preoperative investigations due to lack of reagents. Blood transfusion services were also facing shortages due to limited donors, lack of blood collection bags and reagents.

We updated and published college guidelines on preoperative assessment and investigations. Strategies to reduce wastage of medication and consumables were formulated. It was advised to postpone non-essential routine surgery to save items for essential surgery.

Continuous medical education was also considered extremely important to keep our workforce updated. We organized webinars to raise awareness on managing the crisis among clinicians: “Anaesthetist’s role in the current health crisis”, “How low flow anaesthesia helps in economic crisis- strategies to minimise expenditure” and "Economic crisis – the ideal setting to implement patient blood management in Sri Lanka”. The above webinars helped to raise awareness on the chosen topics.

The preparatory courses for postgraduate exams including selection examination for post graduate MD programme, Certificate in Competence in Anaesthesia (CCA) and final MD and other medical education programmes were continued uninterrupted via college zoom platform. Resuscitation Council of the college continued courses amidst challenges faced due to fuel shortages for both faculty and participants, long power cuts disrupting online access and covid infection.

We are struggling but standing strong together and our worst fear is the current brain drain and its future impact on anaesthesia, intensive care and pain services to the poorest people in Sri Lanka.

Conflicts of interest
The author is the chief coordinator of the crisis management committee.

Acknowledgment
Authors would like to acknowledge the dedication of the President and the Council of the College, the donors from Sri Lanka and all over the world and our workforce starting from consultants to junior staff who are committed to provide safe and efficient healthcare to our nation.