
ICU Volume 10 - Issue 2 - Summer 2010 - Viewpoints / Special Focus on ESA

Interview with Professor Paolo Pelosi



Professor Paolo Pelosi is Associate Professor in Anaesthesiology at the University of Insubria, Varese, Italy. Born in 1963 in Milan (Italy), he graduated in Medicine and Surgery and specialised in Anaesthesia and Intensive Care at the University of Milan. He works both in clinical and research fields related to different areas of Anaesthesiology. And he is deeply involved in national and international educational training and teaching programmes in the field. Prof. Pelosi also a member of the advisory board of several international meetings and journals, and serves as an Editorial Board Member of ICU Management. Since January 2010, he has also very proudly served the European Society of Anaesthesiology (ESA), as President.

What is Your Greatest Interest / Area of Expertise?

My main interests are: 1) Respiratory mechanics and morphological analysis of the lung by Computed Tomography scan during general anaesthesia and in acute respiratory failure; 2) Ventilatory management of patients during general anaesthesia and with acute respiratory failure; 3) Airway conditioning during mechanical ventilation; and 4) Non invasive ventilation.

What Poses the Greatest Threat to Patients in ICUs (Infections, Staff Ratios, Lack of Equipment, Medical Errors)?

I personally believe that medical errors, staff ratios and infections are really serious problems not only in ICU but also outside the ICU. That is one of the reasons why during Euroanaesthesia 2010, the Helsinki Declaration on Patient Safety in Anaesthesiology will be signed. It focuses on how to reduce errors and enhance patient safety by the implementation of European policies, including infection control and staff organisation. This declaration emphasises the key role of Anaesthesiology in promoting safe perioperative care.

What Role Does the Manager / Head of an Department Play in Improving Outcomes and Changing the Hospital Environment?

I feel that the head of an Anaesthesiology department may play a relevant role in the organisation of a system in which outcome can be improved. In this respect, the optimal clinical management of our patients is the best way to improve their outcome.

In my opinion, teamwork, and the creation of a team are essential. Work teams contribute most effectively to the final success to improve outcomes. Of course, building a team, and working as a team is not easy. However, belonging to a team, in the broadest sense, results of feeling part of something larger than yourself.

These are some tips on how to create a team:

- Clear Expectations:** Clear expectations must be defined and communicated in advance, demonstrating constancy of purpose in supporting the team with resources of people, time and money.
- Context:** Clearly identify the strategies to the accomplishment of defined goals
- Commitment:** All team members must be excited and challenged by the team opportunity and feel that the team mission is important. Working in a team, each member must feel there is a chance to build individual as well as general skills.
- Competence:** It is essential that all members have the knowledge, skill and capability to address the issues for which the team was formed. If some help is needed, adequate support must be organised.
- Charter:** Individual area of responsibility, designed to accomplish the mission must be defined.
- Consequences:** From the initiation, rewards and recognition (and penalties) must be clearly set out.
- Cultural Change:** Everyone must recognise that the team-based, collaborative, empowering, enabling organisational culture of the future is differs dramatically from the traditional, hierarchical organisation currently in place. If we work well together, we will all share in the successes.

In addition to the creation of a team environment in the department, there are other important organisational staples that are instrumental in its success:

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Guidelines: Guidelines are necessary to standardise the level of care in each unit. Independent from individual expertise, medical and non-medical staff must have clear rules to adhere to. The application of evidence-based medicine is essential in improving outcomes and reducing costs in our units. Of course, reality dictates that guidelines should be adaptable for each individual case / patient.

Education: Continuous education, within and outside the group, is essential to update and improve medical training of the personnel.

Research: Promoting new interests and the development of knowledge in each unit is crucial part of advancing the profession.

Innovation: Team members should be always open to new ideas, remaining critical but with a positive attitude. Putting the results of new ideas into practice takes time, but we mustn't allow good opportunities and innovations to pass us by. An open and constructive relationship with colleagues from other specialities is another important element in improving the quality of our treatment.

Non-Medical staff: There are a number of key team members who play relevant roles in anaesthesiology management. For this reason, constant updates and discussion are needed between medical and non-medical staff.

Has the Current Economic Downturn Effected Healthcare Across Europe? What do You Think the Future Holds?

In general, the current economic crisis has not negatively affected healthcare. However, it has cast a spotlight on the need for careful management of economic resources in the future. More attention is needed on how much we spend in the daily treatment of our patients and organisation of anaesthesiology departments. For this reason, at Euroanaesthesia 2010, several sessions focus on quality improvement, quality markers, safety indicators, and cost efficiency, as well as the use of evidence-based medicine in every day in anaesthesiology practice. Additionally, the development of strong relations with industry, which is based on common strategies and objectives that are mutually beneficial, is essential to achieve ambitious targets.

Have You Some Wisdom to Impart to those Entering the Field?

Anaesthesiology is a well-recognised medical specialty whose interest is a continuum of patient care involving pre-operative evaluation, intra-operative and postoperative care and the management of systems and personnel that support these activities. In this regard, the concept of peri-operative medicine integrated into anaesthesiology is of fundamental importance, within a multidisciplinary approach. In fact, anaesthesiology includes many different areas of expertise, such as anaesthesia, intensive care, emergency medicine and pain treatment. All these components together, and not independently, are fundamental to making anaesthesiology one of the most fascinating, continually developing and innovative areas in medicine in the forthcoming decades. Anaesthesiology requires daily sacrifice but may also serve to enhance and change your personal attitude with regards to human relationships and life in general. On thing is assured, if you choose to work in the anaesthesiology field, you will never be the same...

In Focus

Euroanaesthesia 2010

Can You Briefly Describe the Focus of the EUROANAESTHESIA 2010 Congress?

Euroanaesthesia 2010 is the sixth annual meeting of the European Society of Anaesthesiology (ESA) is focused on Education, Research and Innovation.

The Scientific Programme Committee has planned a comprehensive programme including refresher courses, interactive discussions, workshops and abstract presentations. Internationally renowned clinical and scientific experts in the field of anaesthesiology have been invited together with lecturers from other related areas of expertise. This reflects the vision of the ESA to develop closer communication and cooperation with other scientific societies, which have expertise in specific medical areas with mutual interests.

As previously mentioned, during Euro anaesthesia 2010, the Helsinki Declaration on Patient Safety in Anaesthesiology will be signed. The European Board of Anaesthesiology (EBA) must be specifically thanked for its important role played in the organisation of this event. A specific session organised by the European Board of Anaesthesiology in conjunction with the ESA will focus on how to reduce errors and enhance patient safety by the implementation of European policies.

The one-day postgraduate interactive European Patient Safety Course, held by international experts, will provide also insights into how errors evolve in medicine, what the root causes are and how patient safety can be improved.

Specific sessions will be dedicated to: a) "Hot topics" in anaesthesia, critical care medicine, emergency medicine and pain medicine; b) Changes in our profession: Intensive Care as part of the residency programme, and the increasing importance of women; c) The role of National Societies of Anaesthesiologists; and d) Quality assurance in the management of postoperative pain (organised by the World Federation of Societies of Anaesthesiologists).

How has Your Experience as ESA President been so Far?

My experience as ESA President is exciting and very promising, so far. This is due to the fact that all members involved in the Society at any level are actively and positively contributing to reach all the goals we are aiming for. In order to be competitive and continuously updated, it is essential that anaesthesiologists are encouraged to keep learning and growing in their fields of expertise. This implies a momentous effort in the continuous education, research and innovation process that ESA actively supports in different forms. In particular, joint programming efforts can deliver results that individual countries cannot achieve in isolation. ESA should further encourage cooperation between European countries through cutting-edge infrastructure and joint policymaking for education, research and innovation.

