Research & Innovation in Anesthesia

An Official Journal of The Anesthesia Academic Society
1. Aims and Scope

In the modern era of biotechnological advances, research and innovations are need of the medical specialty. Research & Innovation in Anesthesia (RIA) is the official journal of the Anesthesia Academic Society. The aim of this journal is to promote the pursuit of academic excellence in anesthesia. The journal shall endeavor to disseminate the latest research in anesthesiology to the trainees, the faculty and the practicing professionals. Research & Innovation in Anesthesia addresses all aspects of anesthesiology practice, subspecialty (cardiac, pediatric, neuro and transplant anesthesia), pain management, intensive care and related topics including ethical and social issues which concerns anesthesiologist. Journal intends to improve clinical practice of anesthesiology and critical care and clarify how new insights can improve daily practice.

Journal aims to disseminate latest research and innovations in anesthesia to resident doctors, teaching faculty and private practitioners. It encourages research and gives opportunity for publications amongst anesthesiology students.

Research & Innovation in Anesthesia shall provide a platform for publication of scientific research and welcomes submitted papers covering original research, basic science, clinical studies, reviews and evaluations, guidelines, expert opinion and commentary, case reports and extended reports.

2. Ethical Considerations

Manuscripts submitted for publication must comply with the following ethical considerations:

Informed Consent

Informed consent of the patients must be taken before they are considered for participation in the study. Patient identifying information, such as names, initials, hospital numbers, or photographs should not be included in the written descriptions. Patient consent should be obtained in written and archived with the authors.

Protection of Human Subjects and Animals in Research

When conducting experiments on human subjects, appropriate approval must have been obtained by the relevant ethics committees. All the procedures must be performed in accordance with the ethical standards of the responsible ethics committee both (institutional and national) on human experimentation and the Helsinki Declaration of 1964 (as revised in 2008). When reporting experiments on animals, authors must follow the institutional and national guidelines for the care and use of laboratory animals.

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It is my privilege to write a message for Research & Innovation in Anesthesia (RIA), which is the Official Journal of the Anesthesia Academic Society. Over the years, Anesthesia as a specialty has grown tremendously toward excellence in patient care as well as research. In the modern era of biotechnological advances, research and innovations are the need of the medical specialty. This journal not only aims to promote the pursuit of academic excellence in anesthesia but also to disseminate the latest research in anesthesiology to the trainees, the faculty and the practicing professionals. This journal plans to cover all aspects of anesthesia practice, subspecialty (cardiac, pediatric, neurosurgical and transplant anesthesia), pain management, intensive care and related topics including ethical and social issues, which concern the anesthesiologist. It plans to accept original research, basic science, clinical studies, reviews and evaluations, guidelines, expert opinion and commentary, case reports and extended reports. I am sure the wisdom disseminated from various articles and editorials of this journal, will improve the clinical practice of anesthesiology and critical care and save many patient's lives. This journal will also provide an opportunity for the students and faculty of anesthesia to publish their work.

I congratulate all the contributors and the editorial board for bringing out such an academic and research-oriented magazine.

Wishing them all the best!

Avinash Supe
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We feel honored and proud to write in this maiden release of the Journal of Research & Innovation in Anesthesia. Research as such is one of the most neglected subset of many branches including anesthesiology. There is a definite lacunae in our system especially in India. Mindset for most of us is research takes pains takingly long-time and results may not be always positive. We are use to retrospective studies only.

It was a pleasant surprise to know that KEM anesthesia faculty is rising to the needs of the hour despite of their busy schedule. A first in everything in life is always special. We are glad that through this journal anesthesiologists will be contributing toward the betterment of the anesthesia community including students.

We congratulate KEM anesthesiology team for the tireless efforts and also wish all the best for a bright and fruitful future.

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Publish or Perish, Med School Teachers !!!

Palpable unrest is obvious, with government and corporation medical colleges issuing a circular to their faculty for submitting evidence of publications for their promotions in many universities. There is an assumption prevailing that research and publication make one a better teacher. Further, publications are valid only if they are in certain prescribed journals and if teacher is first or second author. Subsequent authors as if have no contribution at all! It is very well understood that each of the authors has their share of contribution. Some have originated the idea, some have done related research to write the protocol, some have mobilized resources for the study, some have carried out the actual study, some have used their statistical skills, while some have managed to write the article. Thus, generally, it is a group of authors with a variety of clinical and soft skills but with a common goal coming together to form a team. Just as in a football team, the role of each and every member is important. Be it a captain, goalkeeper, defender, forward, or any player, all of them play in coordination in an attempt to win a game. Publication of an article is a team effort. Giving importance to first two authors and writing off the rest of them is an unfair game. If we continue to follow the same rule, probably we will never have a team, we never will play a game, or win a game! What about collaborative studies involving two or more disciplines? Who should take the most credit? How to justify the sequence of authorship? Are we destroying opportunities for multidisciplinary collaborative studies? If we want path breaking clinical studies, we will have to look beyond the first few authors. Authorship issues may create unhealthy competition among team members.

Case reports are probably as useless as news reports. This class of scientific publication has been classified as the lowest rung of study designs as opposed to randomized controlled trials which are considered as the gold standard. It is well understood that there are clear limitations to case report methodology, yet they form the basis of subsequent case studies and clinical trials. Sometimes case reports are the first line of evidence for new therapies. At times, rare adverse events can be identified only through case reports. Off-label use of drugs is also established by case reports. Importance of a good case report cannot be underemphasized. Case reports are not accepted by many editors and journals as they do not help in improving the impact factor of a journal.

Case reports, review articles, and brief communications do not obviously classify as original research and thus do not hold any value as far as promotions are concerned. So, are we heading toward a lot of hurried, unethical, duplicated, fabricated studies coming up in the near future? Or are we facing a threat of medical teachers being extinct in India especially in not so well-funded institutes? Are we encouraging research or precipitating it? Is the concerned authority looking into the plight of medical teachers? Conduct of a good clinical research requires knowledge, aptitude, a team, resources, infrastructure, patients, funds and most important time. In many institutes in our country, there is no research time allotted to the faculty. Patient-doctor ratio is not favorable. With clinical work consuming most of the time of the consultant, there is less time or mind for research. Or else quality of research suffers. Are our consultants not competent enough? Definitely, they are. Unfortunately, it is the unfavorable environment and logistics that are big hurdles to the research.

Publication of an article is the culmination of the research. Publication of a research article in a peer-reviewed indexed journal speaks about its scientific and ethical authenticity. It also reflects desire of the researchers to share their experience with the rest of the world for advancement of scientific knowledge, which may get translated into better medical education and better patient care. The authority needs to acknowledge more than just two authors and give appropriate credit to the whole team. This may lead to better participation from faculty and good quality clinical research. Or research may become a rich man’s game! With maximum patient load borne by government and corporation hospitals, lack of adequate research and publications by their faculties and researchers may lead to distortion of actual clinical scenario and thus gaps in understanding of the health problems in larger population in India.

Number of research publications should not be the only criteria for promotions of medical teachers. His or her clinical acumen in patient management, classroom and bedside teaching techniques in tandem with technological advancement, interpersonal relationship keeping in mind the young adult population he/she is influencing, administrative and regulatory skills are all qualities that must be taken into consideration for the subject of promotion. He is ought to be a good clinician who has kept pace with evolving science, a good administrator who/she manages his/
Brief Communication

her superiors, subordinates, colleagues across the hospital with equal ease, and a good regulator to make policies and protocols to improve the system. For an undergraduate or postgraduate student, there is more to learn from a medical teacher apart from research, many soft skills which are abstract and extremely difficult to measure. But that does not mean that an easily quantifiable thing like number of original research publications can be the only yardstick for promotions of medical teacher.

Research and publications are absolute essential aspects of evolution of healthcare system, medical science and education. Good quality research and publications portray high scientific and ethical standards of the country, attract foreign investments for clinical trials and exchange programs for the postgraduate residents. The governing authority, thus, must demand the highest standards of research and publication provided medical teachers, faculties and researchers have access to background facilities for the same. There is a need to introspect the system that has a huge gap in the recommendations and practice. Dealing with the root of the problems can definitely improve the interests of medical teachers and researchers to conduct quality research. Thus, the country can win a game point, advantage India!

REFERENCES

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