Editorial

Our final issue of the SAJAA for 2002 contains a variety of articles, and hopefully there is something that will be of interest to everyone. We have looked at a variety of practical issues, ranging from patients on long term corticosteroid therapy, problems associated with arterial tourniquets, fever in pregnancy, beta blockers to “how to do” low flow anaesthesia.

Our first article is a comprehensive review by Krzysztof Kuczkowski on the choice of anaesthesia for the febrile parturient, a dilemma which faces us all at some time. What is the cause and can we use a regional technique?…read on and find out. Aithne Rowse’s thorough review of the use of arterial tourniquets should be read by anaesthesiologists and surgeons. How often have we “allowed” our orthopaedic colleagues to use a tourniquet on a limb for 3 to 4 hours, without intermittent deflation? The consequences may be dire, as we can see.

Bruce Biccard’s overview of beta blocker use in patients presenting for non-cardiac surgery is a reminder to us all of the risks of anaesthetising many of our patients and what measures we can take to lessen these. Low flow anaesthesia is definitely the way to administer anaesthesia these days, but how many of us arrive at a clinic and are faced with a new anaesthetic machine that is best suited to low flow anaesthesia and we are not sure where to start? Erni Welch takes us back to basics in his practical review of “how to do” low flow anaesthesia, and highlights many of the pitfalls and problems.

Our guest editorial clarifies very clearly and succinctly the principles governing perioperative corticosteroid replacement. As Ivan Joubert points out, steroids are not innocuous drugs, and we tend to administer too much to our patients perioperatively.

Once again, a big thank you to the “Trade” for their continued support of this Journal, which ensures that all SASA members receive it free of charge. I would also like to express my gratitude to those who have contributed to the Journal, as well as to the members of our editorial board, who contribute an enormous amount to peer reviewing the various submissions.

Prof Christina Lundgren
Editor-In-Chief