



# Difficult Airway Society

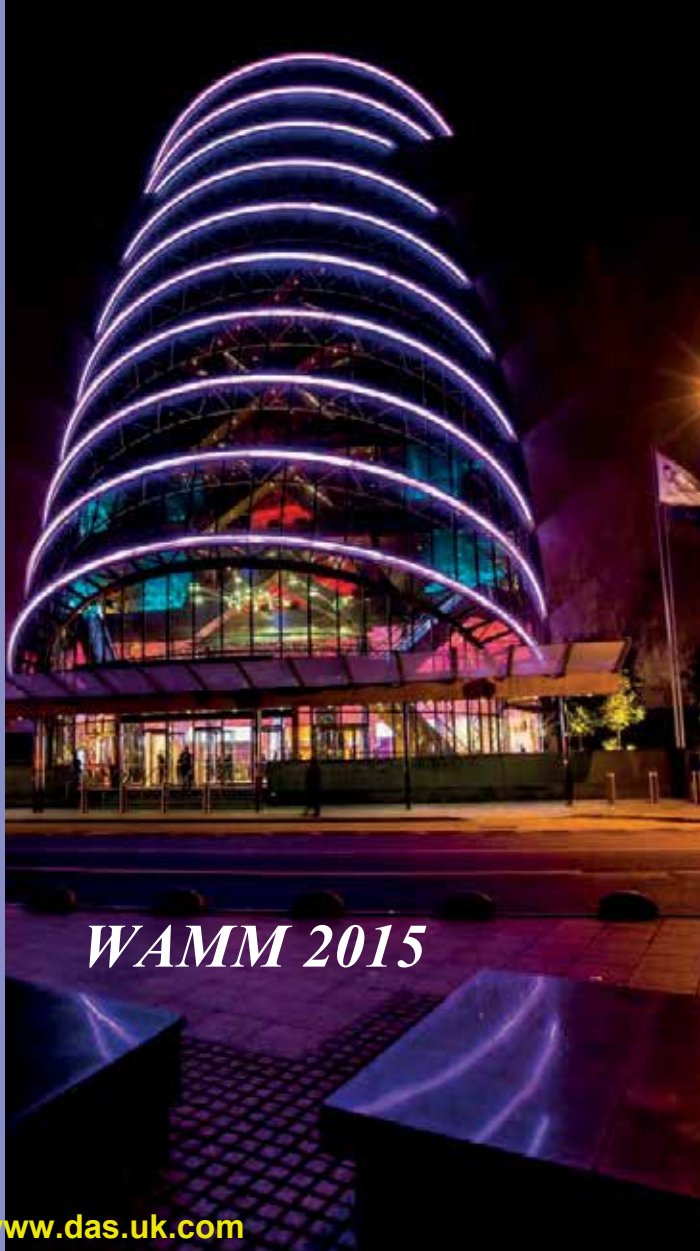
## NEWSLETTER

*Airway Revalidation Course*

*Pen of the inventor*

*Book review*

*A trip to Sierra Leone*



*WAMM 2015*

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**SUMMER 2015**

## EDITORIAL

Senior trainees get advice to take a break and chill out after their CCT date and before starting the consultant post, as they may not get another opportunity like that later. But some of us take that a bit further and do some thing more courageous and amazing. We have included the inspirational story of one of our members, who decided to travel to Ebola stricken Sierra Leone, to join the medical team there.

The much awaited Airway Revalidation Course (ARC) was a huge success, thanks to the efforts of Drs Ravi Dravid & Sudheer Medhaker who organised it. In this issue, Dr J Klein reflects on his experience as a delegate at this DAS flagship course. The places for the next course at Glasgow are filling up fast. But DAS is planning many such courses in different parts of the country in the coming year.

Hoping to see many of you at the World Airway Management Meeting , jointly organised by DAS and Society of Airway Management-USA. This is the first ever airway conference supported by most of the airway societies around the world and will no doubt be an academic and social treat to any anaesthetist with an interest in difficult airway management .

Warm regards

**Sajay**



**A.Sajayan**  
Birmingham

[newsletter@das.uk.com](mailto:newsletter@das.uk.com)

*Disclaimer: This newsletter is published on behalf of the Difficult Airway Society-UK , solely for circulation among its members and contacts. The views expressed here are those of the authors and does not necessarily reflect those of the society. Reproduction of any parts of this publication in any form requires prior approval from the editors*

# PRESIDENT'S PAGE

I had announced at the DAS AGM at Stratford upon Avon, that it was necessary to bring all our executive committee elections 'in- sync'. To meet this, we would soon be calling for elections for the post of DAS President. The newly elected President of DAS will be announced in November during the next AGM at WAMM, Dublin. We will shortly be announcing the election process by e-mail and on our website.

DAS has established itself as the world leader in bringing out airway management guidelines and audits. I must take the opportunity to congratulate Dr. Mary Mushambi and her team for bringing out the OAA-DAS obstetric difficult and failed intubation guidelines. This brilliant document will soon be available on our website.

I am from a DGH with a very active airway group. The Wexham Airway Group has been conducting regular airway workshops and courses year on year since 2003. Apart from annual local workshops, we have had ten overseas advanced airway workshops in Europe and East Africa. It is a matter of pride to lead such a dedicated team who volunteer their time and funds to reach out and teach advanced airway techniques overseas.

This June, in line with DAS policy to promote greater ties with our overseas partners, we were off to Kosice, Slovakia. The delegates were mainly postgraduate anaesthesia trainees and it was a very rewarding and enjoyable experience to share the latest in airway management with our young Slovakian anaesthetists. Their enthusiasm and hospitality was second to none and we have promised to return and share our experiences with more centres in Eastern Europe.



INTERNATIONAL AIRWAY WORKSHOP



KOŠICE



DAS continues to forge ahead with our ties with the Indian partners and we are once again proud to associate our recognition to RAALS airway workshops. DAS will be sending two senior members to RAALS 2015 this August.

Our international exchanges are mutually rewarding. The overseas partners are proud to be associated with DAS and we are enriched by our exposure to airway management in different countries and environments. It is truly a win – win experience for all.

At home, we have had a highly successful DAS Airway Revalidation Course (ARC) held at the RCoA. The course generated a great amount of interest and was oversubscribed.

Dr. Ravi Dravid, leading the course, has planned for more across the country and please do look-out for adverts and book early to avoid any disappointments.

I am sure you have applied for your leave and booked to meet up at WAMM this November in Dublin. Please visit [www.wamm.com](http://www.wamm.com) for registration and further information.

Once again, I take this opportunity to thank my committee members who are tirelessly working to bring you more exciting activities and making my task ever so enjoyable and promising.

Wishing you more of our glorious summer – enjoy while it lasts!



**Jairaj Rangasami**

President DAS

## SECRETARY WRITES.....

The much awaited DAS Airway Revalidation Course was launched on the 19th of June at the RCOA and was an instant success. Many congratulations to the team , particularly Dr. Ravi Dravid, who worked so hard towards it. Thanks also to all the supporting staff who made it possible. The feedback has been excellent and the next course in Scotland should be another day of high quality education!

The NWAC ( Networking World Anaesthesia Convention) in Vancouver was yet another successful DAS verified meeting and was represented by many DAS committee members. The value of the scientific meeting was complemented by the beauty of the place, with scenic mountains, vast expanse of water and some magnificent wild life. Congratulations to Dr. Imran Ahmed who was the organiser of the airway component .

SCATA ( Society for Computing and Technology in Anaesthesia)-UK annual conference in Birmingham organised by Dr. Sajayan in May was a fascinating meeting that presented anaesthesia in a new and different light. The technological aspects of anaesthesia and intensive care were the main focus of the meeting, and perhaps this is an aspect of anaesthesia that needs to be covered by some prominent peer reviewed journals. I represented DAS and my talk on the evolution of the airway management was well received.

I was at the European Society of Anaesthesia at Berlin in May and was astounded by the vast number of delegates that the organiser's were dealing with. A staggering 6500! It was a good educational set up, where in a few days one could get the required components of their training completed. I was disappointed to note that the ESA in Berlin had no DAS representation! DAS would like to work with the ESA to host airway workshops and airway related lectures. We are currently working towards that end.

In June, I had the great privilege of joining a team from Wexham hospital, led by Dr.Jairaj Rangasami travelling to Kosice in Slovakia. The course organised for the trainees was another beautiful experience of education, new friendships, and some inspiring local leadership. The historical place with some beautiful cathedrals, buildings and pubs was a joy to explore. DAS will support the team at Kosice and help organise future similar courses. DAS will be supporting courses in India and also in parts of Africa.

DAS is currently in the process of appointing a newsletter editor to work with Dr.Sajayan and also a lay member to join our team. Their names will formally be announced in August this year once the process is complete.

Summer is a great time for outings, sports and activities. Despite my busy schedule I managed to read some books. I have reviewed one in this newsletter . If you have read any interesting books, please feel free to write a review and we will publish it.

If you have anything else that you think is interesting you want to share, please write to us.

Enjoy the glorious English summer!



**Dr S Radhakrishna**  
Hon Secretary

# AIRWAY REVALIDATION COURSE (ARC)

## Personal reflections

On 19th June 2015 the Difficult Airway Society delivered the 1st Airway Revalidation Course (ARC) at the Royal College of Anaesthetists. This one-day course is lecture-based, but by choosing a very knowledgeable team of hands-on airway experts who incorporated numerous video clips and high quality images into their slides '*How to Best Manage the Patient's Airway Safely*' came to life.

The course covered 7 domains, level 1-3 of the RCoA CPD Matrix in one day which is very time-effective. Far more importantly, the day reminded us of the findings and recommendations of NAP 4 published 4 years ago. Speakers repeatedly made reference to updates to be expected in the 2015 DAS 'Airway Guidelines'; the unequivocal challenge for all UK anaesthetists to be competent in Front of Neck Access (FONA) with a 6mm tracheal tube when undertaking airway rescue managing CICV has long been overdue and was well made.

### Did this course fulfil its promises?

It was well researched. I was particularly pleased that reference was made to very recent UK authored publications e.g. regarding difficult airway management in the pre-hospital environment.

All presentations were evidence-based.

It most certainly was clinically useful by integrating 'real life scenarios'.

### What could be done to make it better?

All of the lectures may benefit from some editing: shortening them and reducing repetition may allow 10 rather than 5 minutes for questions and comments after each lecture from the audience.

Although this educational event serves predominantly the CPD needs of anaesthetists and intensivists, it was also marketed for emergency physicians. Emergency management of the difficult airway is increasingly undertaken by emergency physicians when patients present in their departments without any pre-warning.

There has been extensive audit activity particularly north of the border, scientific papers and educational efforts such as the TEAM (Training in Emergency Airway Management) course to nurture collaboration between specialists in emergency medicine and anaesthesia or intensive care medicine in best managing the patient presenting with a difficult, imminently life-threatening airway challenge. This course should address airway management outside theatres in the Emergency Department to the same degree as it did for the ITU environment.

**In summary:** The 1st Airway Revalidation Course had an excellent start. Creating this time-effective, high quality CPD event by DAS and its Education Lead 3 years ago with a roll-out programme supported by the DAS-RCOA Airway Network Leads is visionary. I hope that practicing anaesthetists, intensivists and emergency physicians will have access to this course in the regions they work in sooner rather than later.



**Dr Juergen Klein**

Consultant in Anaesthesia & Intensive Care Medicine  
Royal Derby Teaching Hospitals NHS Foundation Trust

## Inaugural ARC -Speakers and organisers



Drs Stuart Benham , Ravi Dravid, Mansukh Popat, Hamid Manji, Barry McGuire, Sudheer Medhaker, S.Radhakrishna, Mark Price, Christina D Navarro, Cyprian Mendonca & Andy Higgs





# DIFFICULT AIRWAY SOCIETY **AIRWAY REVALIDATION COURSE**

**13 Oct 2015**

**Venue:** Medical Education Training  
Centre, Kirklands Hospital, Fallside Rd,  
Bothwell, Glasgow, G71 8BB

*Local coordinator - Dr Raj Padmanabhan, Consultant Anaesthetist, NHS Lanarkshire*



## **What you need to know about safe Airway Management**

Following on from the very successful National Audit Project 4 (NAP4), Airway Leads Day, and several new 'Airway' guidelines, Difficult Airway Society is pleased to announce the second of a series of Airway Revalidation Courses to be held on 13 Oct 2015. The Course launched in collaboration with The RCoA is specifically designed to meet the airway CEPD requirements of UK Anaesthetists.

It benefits from DAS standardisation, peer review and quality control. It is based on latest evidence and draws upon the experience and consensus of experts in airway management. DAS experts and high profile airway trainers have developed the full day course consisting of up-to-date lectures on various aspects of airway management which include

- Airway Assessment
- Decision making in Airway management
- Choosing The Right Equipment
- Managing The Correct Technique
- Extubation
- Human Factors and Non Technical Skills
- Airway management outside theatre environment



The Course is specifically designed to meet the Airway CPD requirements of UK anaesthetists.

For more information  
and booking details visit

**[www.das.uk.com](http://www.das.uk.com)**

## MY SIERRA LEONE EXPERIENCE



In February this year, I flew with 11 other NHS workers to Sierra Leone to work at an Ebola treatment centre in Makeni. All from different backgrounds, specialties, ages and experience but we had one thing in common. We had just completed a one week intensive training programme in the UK to prepare us for our work in Sierra Leone. This was the first time the NHS had responded in such a way to an outbreak. Working with UK-Med, NHS released its workers to go work alongside local staff in the affected countries.

The recent outbreak of Ebola Virus Disease (EVD) in West Africa is due to the Zaire strain of The virus and is the worst outbreak of EVD ever, already killing thousands. The incubation period is 21 days and carriers become infectious when they are symptomatic. EVD strikes hardest in the young and old. Spread is via contact with bodily fluids. The sickest are the most infectious

as are the dead bodies. In a society where people look after their own sick and have open funerals Ebola has thrived.

There are currently no effective medications to treat Ebola infections and no licensed vaccine. Ebola had totally destroyed the health infrastructure, killing hundreds of health care workers. But Sierra Leone is a country determined to fight this dreadful disease.

The treatment in the Ebola treatment centre is free but locals are used to attending the local witch doctor first. This has simply lead to the spread of the disease. The treatment centres were especially built by the military and are well organised clinical facilities, but basic by western standards. Treatment is symptomatic and supportive care. Patients need to be screened and if carriers they are isolated and treated as the symptoms start. Good nutrition and nursing care with fluid resuscitation is the backbone of this care. Throughout all of this protection of the community, self and other staff take priority.

My group were sent to Makeni a town 114 miles from the capital Freetown. The number of cases had been dwindling as we arrived and we were warned we may not be very busy. However due to a local outbreak we were the busiest of all the NHS teams sent out. The work was made harder by the heat of the African sun peaking at 44 degree celsius during our time there, compounded by the fact that any treatment done was undertaken whilst wearing the full protective suits.

Our treatment centre was run by an American charity International Medical Corps (IMC). Their support for staff was excellent. All Personal protective equipment (PPE) facilities were available at all times with staff available to ensure your kit is donned correctly and more importantly doffed correctly. Doffing is the slow process of removing your PPE. Used PPE is most likely contaminated with Ebola virus and therefore staff are more likely to become exposed whilst removing their PPE. Our excellent training in the UK prepared us well for this. Inside the suits it is like a sauna. It is not unusual to lose several kg of weight during a 1 hour session in the PPE. However we worked as a team, providing support for each other at all times and we all coped well.

Upon return to the UK we faced 3 weeks quarantine with twice daily temperature checks monitored by public health England. We had some limitations placed on our activities but we were allowed home. Response from family and friends was supportive and all were relieved to see me home healthy and well.

I have often been asked why I went. The answer is simple, the opportunity was there and it was the right thing to do. The experience was rewarding and it was a privilege to work alongside the local staff, many of whom are still there, risking their lives everyday to care for their patients.

I would like to thank my trust for allowing me the opportunity to go and for UK-Med and IMC for looking after us throughout our deployment.



**Dr Nageena Hussein**

Consultant Anaesthetist

Worcester Acute Hospitals, NHS Trust



# COVENTRY CADAVERIC AIRWAY COURSE

**Friday 4th September 2015**

**Course aimed at** senior trainees, trust grade doctors and consultants in Anaesthetics, Emergency Medicine, Paediatrics, and Intensive Care Medicine. Course is also open to Nurses, ODPs, Paramedics, and Trade Representatives.

**Hands-on experience of** direct laryngoscopy and videolaryngoscopy using a variety of different devices, intubating through the laryngeal mask, fibre-optic intubation (nasal and oral), and surgical cricothyroidotomy on 8 human cadaveric specimens. A ratio of only 2 delegates per specimen to ensure a high quality experience, far superior to practice on mannequins. One delegate of the pair will have the opportunity of performing the surgical cricothyroidotomy.



**One day course available** on Friday 4th September, 2015 at West Midlands Surgical Training Centre, University Hospital Coventry, CV2 2DX.

CPD points applied for.

**Course fee** is £250, plus additional £50 to perform the surgical cricothyroidotomy (limited availability).

**Course directors:** Dr Joy Beamer, Consultant Anaesthetist UHCW  
Dr Rajneesh Sachdeva, Consultant Anaesthetist UHB.

To book a place, please go to -

[https://www.mededcoventry.com/Courses/surgical\\_Training\\_Centre/CA/](https://www.mededcoventry.com/Courses/surgical_Training_Centre/CA/)

Or more information please contact: Joy.Beamer@uhcw.nhs.uk

## TRAINEE REP'S REPORT

Greetings from humid and thundery Oxford, where paternity leave is coming to an end and I'll soon be back to an airway advanced training module.

One of my aims over the coming months will be to improve the educational resources available via the DAS website. I hope to make a series of videos outlining airway assessment and management techniques, in a format intended for teaching. These will be available publically on the website. I aim for the DAS website to be the 'go-to' place for all anaesthetics trainees when they think of airway management, in the way that some of the American society websites are for other anaesthetic sub-specialties. Having high quality and up-to-date media should be particularly useful for trainees who are themselves teaching others, and trying to include the important areas from the basic and intermediate curricula will be my initial focus.

Dr Ahmed - our surveys co-ordinator- has been working with several trainees looking at the UK experience of advanced training modules and fellowships in airway anaesthesia. The society is interested in following up this work by producing its own ideal specification for an attachment of this type. I would be very interested in hearing the views of other trainees on this, although this is at a early stage please email me your thoughts at [trainee@das.uk.com](mailto:trainee@das.uk.com)

At the latest committee meeting it was proposed to have two trainee representatives at a time with a period of overlap - watch this space for further developments. One other area of interest to trainees was the possibility of small DAS grants for research projects, to be administered separately from the NIAA grants: again further details are still to come, but hopefully this will support smaller innovative airway research projects in which trainees are participating. Our next committee meeting is in mid-August, so please get in touch shortly if there are any issues that are key to trainees in the society you would like raised.

Good luck to all those settling into new rotations in August!



**Angus McKnight**

DAS Trainee rep

## FROM THE PEN OF THE INVENTOR(S)



March 2012 - 'Wouldn't it be great if we could use the amazing camera on our phone to record and display endoscopic images to our patients' – this was the original thought that led to the development of the endoscope-i. CC and AG are both ENT surgeons, hence our original intention was to make this a device for ENT diagnosis and treatment, although the technology is applicable to any endoscope users (from vets to engineers, anaesthetists to urologists).

July 2015 – over 1000 endoscope-i's have been sold in 65 different countries. The e-i Pro app came runner-up in the 2015 Tech UK best mobile health app competition and endoscope-i in association with Heart of England foundation Trust have been awarded a Regional Innovation Fund (RIF) grant from NHS England in January 2014.

Back in September 2011, when AG first floated his idea of a smart phone endoscope adapter, we had little idea what it would take to conceive, prototype, manufacture and sell a medical device to a global market<sup>1</sup>. Just over 3 years later we have learnt many lessons in device prototyping (having a 3D printer is really handy), CE marking (it's a minefield of people trying to make money), sales (whilst google translate is useful, its best not to business with it) and fulfillment (however hard you try, you'll never get a package into Russia).



Fig 1

Fig 2



Our initial team involved CC, AG and Dr Mark Prince, a lecturer in Engineering at Aston University who designed and prototyped the endoscope-i adapters. Our initial presumption was that this alone would be the solution, however preliminary testing revealed, the now self obvious fact, that the iPhone camera is not optimized for use down an endoscope. There are 2 principle solutions for this – designing a lens based system<sup>2</sup> (as pursued by a number of other companies in the market) or writing an app to control the camera function. We used our guiding principles of trying to find the simplest solution possible and decided to stick with a very simple, easy to use adapter, and design an app to control the camera function.



The e-i Pro app, written by Simon Pargeter the 4<sup>th</sup> member of the endoscope-i team, optimizes the iPhone camera function to produce amazing HD endoscopic imaging. (figure 1 and 2)

By the time this article is published we anticipate both the devices and the e-i Pro apps will be CE marked. The team are also dealing with the patient confidentiality issues surrounding smart phones and medical imaging by teaming up with both Telstra in Australia, one of the worlds leading Telecommunications companies and University Hospitals Birmingham. Both these institutions are producing a secure image upload service into medical records (and critically, deletion from the mobile phone).

Once image upload facilities are present, we anticipate the endoscope-i will allow clinicians much improved disease surveillance, and for anaesthetists – the ability to record intubations. Whilst we wouldn't expect the storage of this information routinely, it will make a great adjunct for teaching and allow previous difficult intubations to be watched prior to undertaking a planned GA.

endoscope-i showcases the 'Best of British' with all design, development and manufacturing taking place in the West Midlands, UK where the 4 team members are based. More information on projects can be found via our website<sup>3</sup>, facebook and twitter pages or to see the system in action watch the You Tube videos.



**Chris Coulson** – Consultant ENT surgeon,  
Queen Elizabeth Hospital, Birmingham



**Ajith George** - Consultant ENT surgeon,  
University Hospital of North Staffordshire

## References

1. George A, Prince M, Coulson C. The 'endoscope-i': A mobile solution for endoscopy in Otolaryngology Clin Otolaryngol. 2013 Feb;38(1):104-106
2. [www.clearwaterclinical.com](http://www.clearwaterclinical.com)
3. [www.endoscope-i.com](http://www.endoscope-i.com)





# WORLD AIRWAY MANAGEMENT MEETING (WAMM) 2015



WAMM is approaching fast, after years of planning, I can't believe it is only 4 months away. I hope many of you have booked your place – and there is still time to take advantage of the early bird booking rate, which closes on Tuesday 8 September 2015.

WAMM is a joint meeting of two of the largest airway societies, DAS & SAM, in the world. Both societies will be celebrating their 20th anniversaries and so it will be a special occasion. In addition, many other societies including the European Airway Management Society (EAMS), Australian group (SIG) and Indian Airway Society, to mention just a few, have signed up as affiliates and there is interest also from our surgical and emergency medicine colleagues.

There is still time to submit your Abstracts for the meeting, submission deadline does not close to **Friday 4 September at 23:59 Hours (BST)**. The organising committee have worked very hard to bring you an amazing programme, to include renowned international speakers. The highlights of the programme include:

**Airway surgery - Past, present & future?**- *Prof Martin Birchall, London, UK & Mr Guri Sandhu, London, UK*

**New DAS Intubation Guidelines** -*Dr Chris Frerk, Northampton, UK*

**Human factors & airway nightmares** - *Prof Alan Merry, Auckland, New Zealand & Dr Kevin Fong, UK*

**Decision making in airway management**-*Prof. William Rosenblatt, USA*

**Airway management guidelines around the globe**-*Prof. Carin Hagberg, USA*

**Meet the expert sessions** - There will be a novel opportunity to meet experts in a variety of areas in smaller expert sessions, there are over 15 topic areas to choose, ranging from 'Challenges in obstetric airway management' to 'Airway management for morbidly obese patients'

Workshops will include :

**FOI / Video / SADs** – Led by **Dr Ravi Bhagrath, UK** – Experts in the field will give hands on guidance for these techniques.

**Front of Neck Access** – Led by **Dr Paul Baker, New Zealand** - This workshop has been approved by the Australian and New Zealand College of Anaesthetists (ANZCA) as an emergency response activity (recognition code ER-15-CICO-013). The syllabus for this workshop will include discussion and hands-on experience in managing a “cannot intubate, cannot oxygenate” (CICO) crisis.

**Ultrasound** – Led by **Dr Michael Seltz Kristensen, Denmark** - After completing this hands-on workshop, participants will be able to:

Identify airway structures with ultrasound

Recognize the air-tissue border from tongue to mid-trachea and at the pleural level and much more....

**Pre-congress simulation course** – Led by **Dr Crina Burlacu, Dublin, Ireland** - includes an international faculty , and is being held in a dedicated simulation centre.

**Cadaver Tracheostomy Masterclass** - This will be run by a group of ENT surgeons and anaesthetists

There have been amazing innovations/developments in the field of airway management in the past 20 years and many of the people involved have agreed to attend and to share their experiences with us. Also, our partners in industry, who have supported the advances we have made, are already signing up with over 40 international companies in attendance helping to make this a world class event.



**Dr Ellen O' Sullivan**  
Immediate Past President DAS  
Co - Chair WAMM

## WHAT TO DO IN DUBLIN?

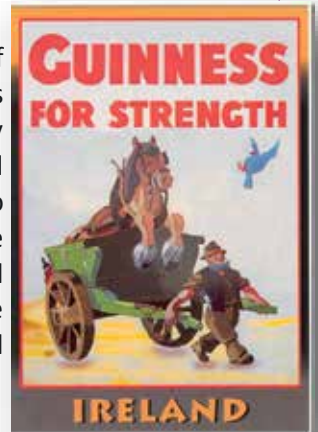
Dublin was chosen as the host city. It is a wonderful place and recently voted in the top 10 cities to visit by LONELY PLANET.



The **Convention Centre** in Dublin is an excellent venue and will be a fantastic backdrop for this very special event. Why not stay on in Dublin and experience the wealth of activities that Dublin has to offer, from the famous Guinness storehouse, exclusive shopping districts and top quality Gold Courses, there is something for everyone to enjoy.

A selection of the many things you can entertain yourself with while not at the conference:

**Guinness Storehouse** – Sample the famous birth place of Guinness where Arthur Guinness first started brewing his now world famous drink. Pop by for a tour of the factory which is still making Guinness today. See the process and sample the famous nectar. If you don't have time to do this, don't forget the Gala dinner is being held at the Guinness storehouse, which will include a mini tour so kill two birds with one stone, see the Guinness storehouse while dining with your colleagues at a WAMM social event not to be forgotten.



**Jameson Distillery** – Relive the story of John Jameson and Son through the history, the atmosphere and above all the taste. You will discover the time honoured secret of how three simple ingredients, water, barley and yeast, are transformed into the smooth golden spirit that has always been and continues to be Jameson Irish Whiskey. All guests are rewarded with a signature Jameson drink



**Dublin Castle** - is the heart of historic Dublin. In fact, the city gets its name from the Black Pool - 'Dubh Linn' which was on the site of the present Castle garden. The Castle stands on the ridge, on a strategic site at the junction of the River Liffey and its tributary the Poddle, where the original fortification may have been an early Gaelic Ring Fort.

**National Gallery of Ireland** - The National Gallery of Ireland in Dublin boasts some 2,500 paintings and approximately 10,000 other works in different media including watercolours, drawings, prints and sculpture. Every major European school of painting is extensively represented. It also houses a renowned collection of Irish paintings, the majority of which are on permanent display.

**Award Winning Golf courses** – Dublin is renowned for its championship golf courses, including St Margaret's Golf and Country Club, tournaments including the Irish PGA Championship, Irish Senior's Open and the Ladies Irish Open. St Margaret's is an accredited member of the Bord Fáilte Golf Assurance Scheme, which ensures your golfing experience is professionally managed.



**Temple Bar** – The nightlife in Dublin is famous for its welcoming bars and Irish Music, drink and dance the night away once the conference is finished in one of Dublin's hidden gems. Or dine in one of the many finest restaurants, including Elephant and Castle with their famous chicken wings that can't be missed.

This is only a small selection of what amazing treats Dublin has to offer. So please join us to

celebrate how airway management has evolved over the past 20 years and meet the people from all over the world, who made it happen!

It will also be an opportunity to look ahead to an exciting future of innovations and developments in this important area which is integral to what we do....We promise you the BEST & LARGEST AIRWAY MANAGEMENT MEETING you will ever attend and will give you a CEAD MILE FAITLE when you join us in Dublin....

Mile Buiochas,  
**Dr Ellen O' Sullivan**

**Scientific Session for  
ODPs/Anaesthetic nurses at the  
World Airway Management  
Meeting**



*12th - 14th November 2015 Dublin Ireland*

*Great opportunity to hear international experts in  
the field*

*Biggest international airway meeting*

*There will be a dedicated  
ODPs/Anaesthetic nurses session  
on Friday 13th*

*Grasp this opportunity and drive our profession  
forward*

*We need to have our presence felt*

*€ 75 per day for DAS associate members*

**To be eligible for the discounted conference  
rate you must be a DAS associate member  
Associate membership is now FREE for  
ODP's and anaesthetic nurses  
Join now at [www.das.uk.com](http://www.das.uk.com)**

**See you in Dublin**

**For further information Contact:  
[sudheermedakkar@hotmail.com](mailto:sudheermedakkar@hotmail.com)  
[d.howarth116@btinternet.com](mailto:d.howarth116@btinternet.com)**



**WAMM**

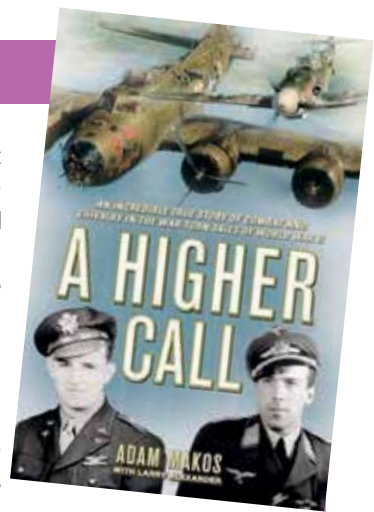
WORLD AIRWAY  
MANAGEMENT MEETING



DUBLIN 2015

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## BOOK REVIEW



'A Higher Call' is a brilliant book by Adam Makos, published in 2013 which highlights the greatness of a German Pilot who on the 20th December 1943 could have spelled the doom for 9 allied soldiers flying an American B-17F. Instead he assessed the situation and at a great risk to himself, decided to safely escort the damaged aircraft past the enemy lines into safety. Such acts of greatness are few in history but often forgotten in the common theme of the 'destructiveness of War.' 'A Higher Call' captures the action on the battlefield as related by those who were there at the time and at the very brink of death. Out of the terrible tragedy of war emerges this greatness of human kindness and spirit which later brought the two chief pilots together.

They spent their later years travelling together and sharing their stories with the rest of the world and the most important moral that came out of it, "we are better off as friends than as enemies!"

The book reminded me of the well known story of the German athlete Carl Ludwig Lutz Long, who during the Berlin 1936 Olympics, saved Jesse Owens from a possible disqualification. Noticing that Jesse had failed twice by crossing the line during the long jump and faced disqualification, he walked up to Jesse to advise him to jump a few inches before he reached the line so he could qualify. Jesse not only took his advice and qualified but went on to beat Carl to win the Gold. Gracious in defeat, Carl was the first to embrace and congratulate Jesse in right in front of the Nazi leader, Adolf Hitler. It was a great act by a German athlete under the circumstances. It is well known that the then U.S. President Franklin D Roosevelt did not congratulate Jesse or invite him to the White House, because of his strong feelings against the black athlete. Jesse Owens later said that he treasured the brief friendship he had with Carl Lutz Long more than the medal he had won. Not long after, Carl Long was to die fighting for his country in the Second World War.

The recent ESA in Berlin, gave me an opportunity to explore the city that was once at the centre of WW2. Since then, fresh green grass of civilisation has grown over the several tombstones of human suffering and moral decay. The city is perhaps the most friendly and cheerful I have had the good fortune to visit in the recent years. It reflects the strength of friendship and the endurance of the human spirit that has overcome many such sad events in the past.

'A Higher Call' is a tribute to many great heroes who have surfaced at various points in history and often at the most challenging of times!

Could a similar change of attitude or a 'Higher Call' be the solution to many of the conflicts we see in the health sector today?

**Dr.S.Radhakrishna**



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