

## Cheltenham DAS 2010



The 15<sup>th</sup> Annual Scientific Meeting of the Difficult Airway Society was held in the magnificent surroundings of Cheltenham Racecourse, where a fantastic programme was organised under the able leadership of Richard Vanner.

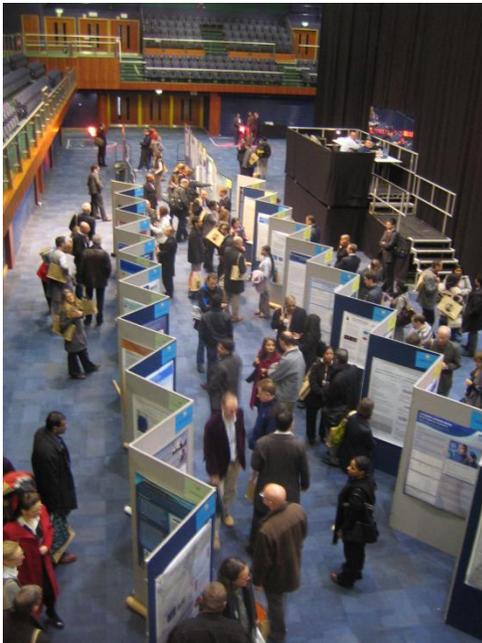
On day one 108 delegates rotated through six workshop stations presented in the corporate boxes overlooking the racecourse. Mike Copp and Chris Mather put a lot of work into the overall coordination of the day and were rewarded with universally good feedback from the delegates. Sessions structured around the successful local Difficult Airway Rescue Techniques Course (DART) were complemented by two simulation workshops which were the undoubted highlight of the day. Based on the Human Factors Airway Rescue Team Training Course (HAT), which has been developed at the Bristol Medical Simulation Centre, these saw delegates managing a dislodged tracheal tube in a prone patient and then engaging in a detailed debrief. Jo Cornes, Lucy Miller and their team took the doors off the rooms to install a fully functional anaesthetic machine, and dressed in operating scrubs they created a very realistic operating theatre environment.



It was standing room only for the first session of the scientific programme, on tracheal access. Mike Saunders, a consultant ENT surgeon from the Bristol Children's Hospital began proceedings with a discussion of some of the airway challenges faced in a tertiary referral centre, including children requiring intubation while still in the birth canal. Professor Jean-Louis Bourgain from Paris followed him and recounted his considerable experience of trans-tracheal ventilation in patients with head and neck cancers. Lastly David Lockey argued persuasively that surgical cricothyrotomy was superior to needle techniques in emergency airway management. He pointed out that the majority of the ballpoint pens available from the trade stands were unsuitable to be used in an improvised tracheostomy; it is surely only a matter of time before an enterprising marketing department puts this right.



A fault with the conference centre heating had the temperature dropping rapidly in the main hall as the second session began, but this did not deter delegates from attending a fascinating set of talks about litigation and the airway. Tim Cook presented some of his recent work based on data provided by the NHS Litigation Authority and showed amongst other things that 70% of the doctors prosecuted for manslaughter over the last few years have been anaesthetists. With our minds duly focused we were treated to a masterclass in how to not get sued from David Bogod, sporting a fetching scarf. Hisclear presentation made it apparent that the majority of airway disasters happen in easy



airways that are managed badly, rather than in difficult airways per se. Jo Lloyd, a lawyer and medical litigation expert then closed the session with an overview of how to best present yourself in court if things do go wrong. Tim Cook took the stage again and they mounted a cross-examination illustrating how to ensure that your version of events gets a fair hearing.

The free paper session after lunch was favoured with some excellent presentations on topics ranging from cricoid pressure training to determining the minimum size orifice that would admit various supraglottic airway devices. Jonathan Mayer was the deserved winner for work showing the effects of infrequent jet ventilation in sheep with airway obstruction.

The final session of the day started with Dr Maya Suresh, Vice President of SAM, who gave a

detailed talk on the topic of airway catastrophes in obstetrics highlighting the fascinating differences in practice between the US and UK. She was followed by Jaideep Pandit who gave an overview of the exciting developments in airway research that have been made possible by the partnership of DAS with the NIAA and NIHR. He also discussed the ADEPT project which promises to help sort out the confusion of new airway devices coming onto the market by creating a new professional standard.



*Receipients of 2010 Sir William Macewen DAS medal,  
Dr John Henderson & Dr Ralph Stephens Vaughan*

Delegates attending the dinner on Thursday night at the magnificent Pittville Pump Room were entertained with excellent food and wine enhanced by the presence of Opera Interludes, whose renditions of famous arias perfectly matched the grandeur of the surroundings. The evening was very well organised by Sarah Bakewell and the after-dinner dancing was still continuing when your correspondent made his way home, well past his bedtime.





Proceedings recommenced bright and early the next morning amidst the descending winter weather. Thankfully the conference hall had now warmed up and delegates were treated to a session on education and the airway. Nick Wharton talked about the success of the Severn Airway Training Society, a group of local trainees who have developed a very successful programme of airway training, which is now being adopted outside the Bristol region.

Corina Lee spoke about her experiences as the inaugural airway fellow at Toronto General Hospital, and offered some helpful advice for others hoping to set up a similar programme elsewhere. Finally Richard Vanner, Fiona Kelly and Tim Cook (again!) discussed an important recent case of death during airway management. Their presentation discussed various learning points around the use of the iLMA and airway exchange catheters, and sensitively analysed what went wrong in this case from a human factors viewpoint.

The penultimate session started with a plug by Andy Norris for the 2011 DAS meeting in Nottingham, where they are already working hard to lay on an excellent conference. He was followed by Chris Acott who spoke about "Everything Airway", a new airway conference to be held in Adelaide next year. Nick Woodall then took over to talk about NAP4. He gave a fascinating insight into the process of coordinating such a large project and provided some previews of the final results (which are due out next year). Almost 115000 cases were recorded during the census phase of the project, allowing the investigators to estimate that the number of anaesthetics being given annually in the NHS approaches 2.9 million, a huge figure. The rate of serious complications due to

airway management is estimated from the study to be in the region of 1:22000, although this may well be an underestimate. Tim Cook then spoke briefly about some of the follow-up work that is being done to investigate the human factors associated with airway management. Brendan McGrath then spoke about the important work he has been doing with the National Tracheostomy Safety Project to improve the placement and management of tracheostomies across the country.

The final session of the conference was centred around the use of sugammadex. Firstly David Levy set out the many serious side effects of suxamethonium and gave a clear explanation of how to use rocuronium in rapid sequence induction. Chris Frerk then demonstrated the use of sugammadex as a rescue drug through the use of real-life case studies, and demonstrated that as good as sugammadex is, it will never be the answer for everything. To finish, Andrew McLeod gave an impassioned lecture on the benefits of muscle relaxation in the difficult airway, drawing heavily on the work of Ian Calder to dismiss the canard that one must always check that bag/valve/mask ventilation is possible prior to administering a muscle relaxant. Finally, with the snow coming down and many people facing long journeys to get home, the meeting came to an end.

This was a tremendously successful meeting, with record attendance and universally good feedback from the delegates thanks to hard work of the local organising committee. We look forward to seeing you all next year in Nottingham.

Dan Freshwater-Turner