Access to Safe Surgery and Anaesthesia for All

Proposed by LO RMA, LO WHO Seconded by Medsin-UK, IFMSA-Sweden

Summary
Equitable access to safe surgery and anaesthesia has long been a neglected component of global health. The poorest third of the world’s population receives only 3.5% of worldwide surgical operations and at least 11% of the global burden of disease could be treated with surgery. Such interventions have been shown to be cost-effective, while failure to treat confers a substantial social and economic toll on those suffering and society at large. Recognizing the amount of suffering, disability and death incurred to patients worldwide by conditions that could have been treated or prevented by well known surgical interventions, had they been available, the IFMSA urges medical students to become aware and act on the issue of inequitable access to surgical care worldwide.

Introduction
At least 2 billion people worldwide lack access to surgical care [1], and surgically correctable pathology is a major contributor to global burden of disease and it has been estimated that 11-15% of the global burden of disease can be treated with surgery (corresponding to a range of conditions such as malignancies, traumatic injury, congenital malformations, pregnancy-related conditions etc.) [2]. The poorest third of the world's population receives only 3.5% of the 234 million major surgical operations undertaken worldwide [3].

More than 5 million die from violence and injury each year, and 90% of these deaths occur in low- and middle-income countries [4]. A significant portion of these injuries would have been treatable with surgical care. Roughly 530,000 women die each year in childbirth [5], which, together with associated infant death and disabilities resulting from obstructed labour, hemorrhage and infection could largely be avoided with universally available safe surgery anesthesia.

Surgical care has previously largely been neglected in global health discourse, largely due to the misconception that surgery is too expensive [6]. It has now been shown that surgical care is a highly cost-effective intervention, in the same range as vaccinations and malaria prevention and treatment [7, 8]. Interest in providing equitable access to safe surgery and anesthesia is growing rapidly, and it is increasingly recognized that sustainable provision of surgical care and anesthesia is a critical part of health systems strengthening.

The achievement of the United Nations Millennium Development Goals 4 and 5, reducing maternal and child mortality depends in part on the availability of surgical and anesthesia care, and surgery is argued to become even more crucial for the post-2015 development goals [9]. A number of WHA
resolutions have made reference to the need for surgical care, such as those for trauma (WHA56.24 and 57.10), disability (WHA58.23), health systems (WHA60.22) and Non-Communicable Diseases (WHA66.10) [10]. Indeed, surgery plays a central role for diagnosis, treatment and cure of a significant portion of NCDs (cancer, cardiovascular diseases, diabetes and chronic respiratory diseases).

Globally, momentum is gaining for addressing the increasing need for equitable access to safe surgery and anesthesia, harnessed by such organizations as the WHO, through the Global Initiative for Emergency and Essential Surgical Care [10], the World Alliance for Patient Safety and the Safe Surgery Saves Lives program, as well as a number of national and international programs. A recently launched Lancet Commission on Global Surgery has set out to address the issue in further detail [11]. So far, no student or trainee network of scale has made a significant contribution to raising awareness about the importance of access to essential and emergency surgical care globally. With its longstanding commitment to global health and health equity it is time for the IFMSA to take a stance for surgery as a global health priority in order to better reflect the breadth of the current global health needs as well as inspire much-needed awareness and student-led advocacy on this issue.

IFMSA’s Stance

The inequitable distribution of surgical and anaesthesia care worldwide represents a significant but neglected global disparity, the solution to which includes improving regional, national and international health systems in an inclusive manner. With an increasingly global and interconnected world, there is increasing opportunity for a collaborative effort to improve access to surgical care for all in need. Representing a diverse group of medical students, the IFMSA acknowledges universal access to safe surgery and anaesthesia as a crucial part of any health system. IFMSA encourages NMOs and standing committees to address this issue in their work, in order to increase awareness of the issue among students, physicians and the general society with the overarching goal of improving outcomes for surgical patients worldwide.

References

