# **Original Research Paper**



# Anaesthesiology

# ROLE OF ANAESTHESIOLOGIST – AWARENESS AMONG MEDICAL AND GENERAL POPULATION

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ABSTRACT Objectives: Despite the varied roles played by Anaesthesiologist in his specialty and allied branches of modern medicine. This study was conducted to know awareness about his various roles, among medical as well as general

Materials and Methods: After obtaining approval from Hospital Ethics Committee and written consent from respondents, the Diploma holders, graduates and post-graduates from medical faculty and from other fields, participated in this study. A questionnaire of 15 questions in yes/no format was provided to the respondent and responses were collected.

Conclusion: Overall awareness about role of anaesthesiologist is less when medical and general population is taken together and there is significant difference between the groups about it. Increasing awareness about his role is need of an hour and so that every work performed will be acknowledged and in result, will be benefitted by the people in larger aspect.

# **KEYWORDS**: Awareness, Anaesthesiologist, Medical & General Population

#### INTRODUCTION:

With the development of science and technology, there has been tremendous development in medical fraternity and anaesthesiology has not remained untouched from it. The roles of anaesthesiologist had expanded from being in the operation theater to outside the Operation Theatre. But, still there is problem of recognition of anaesthesiologist among general population. Uneducated, illiterate population are not knowing various roles of anaesthesiologist - as proved by various previous studies<sup>2-7</sup>, but the awareness among educated population and the medicos or colleagues of anaesthesiologist has not been previously studied. Hence this study was conducted to know awareness among educated and medical population about various roles of anaesthesiologist. We hypothesized that awareness in medical population is aware of all the roles of anaesthesiologist and it is more than general population.

## **MATERIAL AND METHODS:**

This prospective survey was carried out after taking ethical committee approval. Graduates and Post-graduates from Medical faculty (doctors, technician, pharmacist and nursing staff) and from General population(administrative, engineers, lawyers, teachers, scientist and others) who have completed at least graduation, between the age group of 21-65 years were included in the survey while extremes of ages, illiterate, education less than graduation and not willing to respond were excluded from the survey.

The responses were recorded personally, telephonically or through email. Medical population includes graduates from medical, dental, ayurvedic and homeopathy, nursing staff, technicians and pharmacists as they were directly in providing services to the patients. General population includes graduates, from any branches but must have completed their degree. They include engineers, lawyers, civil servants and officers. Informed, valid, written consent regarding voluntariness were obtained and respondents were assured regarding confidentiality of identity and the answers they have given.

The survey form provided to the respondent had 3 parts. Part 1 had consent; part 2 had demographic data including qualification and occupation at present and part 3 had the questionnaire having 15 questions in total. Of these, question no. 1 to 12 was regarding roles of an anaesthesiologist and the respondents have to answer in yes or no format. While question no. 13 gives information regarding previous exposure to anaesthesia of the respondent and also information like who had given it. Question no 14 gave information regarding meeting of respondent with anaesthesiologist like family member, friends etc while the last question was about awareness about qualification of anaesthesiologist.

Total 632 respondents participated in this study, 308 were from medical category and 324 from general category. The demographic data of this study is given in Table no 1. The results of the questionnaire asked related the roles of Anaesthesiologist are shown in the Bar Graph no 1. The Table no 2 shows the result of answers to questions no 13, 14 and 15 i.e. regarding receiving anaesthesia in past, meeting anaesthesiologist and qualification of an anaesthesiologist.

Table no 1: Demographic data

	General	Medical	Total
Male	210 (64.8%)	125 (40.6%)	335
Female	114 (35.2%)	183(59.4%)	297
Total	324	308	632

## Result of questions 1 - 12

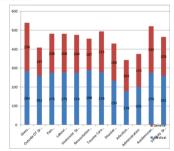


Table 2: Respondent Met Anaesthesiologist in past

	General	Medical	Total
Yes	204(63%)	285(92.5%)	489(77.37%)
No	120(37%)	23(7.4%)	143(22.6%)
Total	324	308	632

Table 3: Respondents Had Received Anaesthesia in Past

	General	Medical	Total
Yes	133 (41%)	159 (51.6%)	292 (46.2%)
No	191 (59%)	149 (48.4%)	340 (53.8%)
Total	324	308	632

Table 4: Qualification of an Anaesthesiologist

	General	Medical	Total
Degree	268 (82.7%)	296 (96%)	564 (89.24%)
Diploma	41 (12.6%)	4 (1.2%)	45 (7.12%)

Technician	15 (4.6%)	8 (2.6%)	23 (3.36%)
Total	324	308	632

#### Statistical analysis:

Data was analyzed by applying tests of significance (Standard Error of Difference between two Proportions).

#### **Observations:**

Demographic data was comparable. The role of giving anaesthesia to the patient inside the OT was known to 92.2% of medical population while 79% of general population was aware of this role. Giving anaesthesia outside OT was known to 84.7% and 45.5 % respectively. Chronic pain management is one of the services that anaesthesiologist is providing is known to 89.3% and 63.6% of medical and general population. Similar type of awareness is there for labour analgesia (90.6% & 58.3%), role as an Intensivist (89.6% & 61.7%), role in trauma care (90.6% & 66.4%) and role as an academician (89.6% & 75.6%). Anaesthesiologists are expert in giving CPCR was known to 93.8% of medical population but only 51.5% of general population were knowing this. Regarding role of anaesthesiologist in disaster management, the awareness was less in both the group (75.6% & 60.5%). Same results were also seen in role in infection control committee (57.8% & 50.6%), role as an administrator (65.3% & 53.7%) and anaesthesiologist as a member of team providing medical care to VVIP national and international people was known to 84.7% of medical and 62.7% of general population.

50.3% & 43.8% of participants has received anaesthesia in past while 92.2% medical and 66.4% have meet anaesthesiologist in past. When asked about the qualification of anaesthesiologist, 97.7% medical population and 88% of general population were aware that anaesthesiologist is post-graduate degree or diploma holder. 1.6% of medical & 4.9% general population still thought that anaesthesiologist are technicians.

#### DISCUSSION:

Despite performing varied roles expertly, 8-12,16,17 the problem of recognition anaesthesiologist's work is present among lay population, although the gap is reducing. Previous studies have assessed the knowledge about anaesthesiologist's role in illiterate, less educated general population or in those who themselves were posted for surgery or whose relatives were posted for surgery. Few studies have included medical students who were not directly involved in treating the patients. In our study, we had assessed the awareness among at least graduates, not posted for surgery and those providing medical services to the patients. At the beginning of the study, we hypothesized that the medical population know all the roles of anaestheiologist and awareness is more as compare to general population. After the study, we found that the although the awareness was more in medical population as compare to general population but not all the role were known to medical population. This lack of awareness could be the reason for non-recognition of the branch, no active participation of patients in selecting type of anaesthesia<sup>4</sup>, no or very less utilization of anaesthesia specialty services like labour analgesia and chronic pain management<sup>2</sup>. At the same time less number of MBBS student are opting for anaesthesia.

The situation can be improved by individual efforts, particularly while doing Preoperative checkups, taking postoperative rounds<sup>13</sup> Utilization of print media, newspaper, magazines, radio and television for wide creation of awareness. Educating other health care professional by publishing papers in their journal, participating in multidisciplinary committees and conferences could be helpful<sup>3</sup>. Including more number of lectures and having anaesthesia separate subject as minor subject in undergraduate syllabus can provide some knowledge among undergraduates.

## **CONCLUSION:**

Overall awareness about role of anaesthesiologist is less when medical and general population is taken together and there is significant difference between the groups about it. Increasing awareness about his role is need of an hour and every effort has to be made to unveil the curtain on the various roles played by the anaesthesiologist, so that every work performed by anaesthesiologist will be acknowledged and in result, it will be benefitted by the people in larger aspect. Our hypothesis that medical population are aware of all the roles accomplished by anaesthesiologist proves wrong.

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