

# A current perspective on risk and safety issues in anaesthesiology practise.

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## Abstract

The function scope of anaesthesiologists has expanded as a result of recent discoveries and improvements in the anaesthesiology, surgical, and medical disciplines, expanding its professional responsibilities and duties. Anaesthesiologists work in environments with a variety of risks that could be harmful to their general health. The literature has discussed many dangers and safety worries, but the scope of difficulties in anaesthesiology practise is much broader than those reported and anticipated. These difficult circumstances are frequently inevitable, and the attending anaesthesiologist must handle them individually. These risks not only have an impact on general wellness but can also pose a serious threat in a number of additional ways, raising the likelihood of morbidity and fatality.

**Keywords:** Risks, Mortality, Radiation, Stress, Drug misuse and Anaesthesia.

## Introduction

The roles, obligations, and expectations placed on anaesthesiologists have grown significantly over the past few years in tandem with the continuous improvements in anaesthetic and surgical procedures, as well as with the introduction of contemporary equipment and newer medications. However, the ever-growing professional and social demands placed on anaesthesiologists both at work and in their personal lives have a significant negative impact on their health. Not just in operating rooms and intensive care units, but also in various remote sites, pre-interventional consultations, pain clinics, MRI suites, and radiation facilities, anaesthesiologists are expected to deliver safe and efficient anaesthetic services. The team that manages trauma and natural disasters must also include anaesthesiologists [1].

### *The following categories can be used to classify risks*

- 1. Biological risks:** Infectious illness risks that linger forever. Anaesthesiologists encounter many pathogens, such as bacteria, viruses, etc., in their daily work. The prevalence of these risks fluctuates from hospital to hospital as well as from nation to country, leading to a non-pathological carrier state for overt deadly infection. In underdeveloped countries like India, where numerous blood and airborne infections are common not just in endemic form and also frequently reach epidemic proportions, the danger is fairly significant [2].
- 2. Mechanical risks:** These risks are uncommon in routine anaesthesia practice, but they still pose a risk of harm and injury to anaesthesiologists at work. These can include

slips and falls in the operating room, falls on pointed objects and broken glass, falls caused by getting tangled in cables from monitoring devices, etc. These can range from simple collisions with equipment and objects in the confined and crowded space of the operation theatre.

- 3. Chemical risks:** Harmful by-products of diathermy and laser use the use of diathermy and laser exposes anaesthesiologists to inhalation of harmful fumes, vapours, and gases because regular surgical face masks are not protective enough. While the poisonous fumes, vapours, and gases produced when using diathermy and laser are often smaller than 0.31 m, the surgical face mask's pores cannot prevent inhalation of particles smaller than 0.5 m in diameter.
- 4. Physical risks:** These dangers can come from a variety of sources, including noise pollution from various alarms and monitoring devices, harmonic and cautery sounds, vibrations from various equipment and suction apparatus, bright lights, electrical dangers from various electrical and electronic appliances, and changes in the operating room's temperature [3].
- 5. Personal risks:** Drug addiction and misuse. Substance misuse and dependency have become a significant aspect of modern anaesthesiology practise. The anaesthesiologist is predisposed to substance abuse that can be devastating for both the patient and himself due to a number of risk factors, individual susceptibility, long, monotonous working hours, fatigable work shifts, personal issues in the family and marital discord, and easy access to sedative and potent psychoactive drugs [4].

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Precautions and preventative measures colleague cooperation is crucial for recovery and the resume of professional responsibilities. It is important to identify the contributing elements to the current condition and make an effort, with a psychologist's assistance, to get rid of any potential contributing variables. Burnout and stress Modern society's fast-paced lifestyle and competitive environment have bred stress in nearly every aspect of life, and anaesthesiology was no exception to its negative mental and physical repercussions.

Stress-relieving methods and approaches there are several actions that may be taken to reduce and get rid of stress in both personal and professional lives [5].

These stress-relieving techniques help a lot with daily tasks and boost motivation in health professionals:

- Preparing and creating newer coping mechanisms for upcoming stress.
- Keeping everyday schedules disciplined.
- Communicating and debating all the bothersome matters with your partner, your co-workers, or your pals.
- Realising one's inner potential.
- Enjoying hobbies and unwinding in free time.

## Conclusion

Prioritizing safety circumstances can be done in a number of ways, including as mandatory, preferred, or otherwise. It necessitates extensive attitude and behaviour adjustment, and it is preferable for governmental or regulatory entities to take an active part in bridging any gaps in existing preventive and precautionary measures. Hospital administrators should support this effort.

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