WHA 70 WFSA STATEMENT: Agenda Item 17.1 Strengthening emergency and essential surgical care and anaesthesia as a component of universal health coverage (Resolution WHA68.15 (2015))

The World Federation of Societies of Anaesthesiologists represents hundreds of thousands of anaesthesiologists in over 140 countries around the world. We aim to achieve universal access to safe anaesthesia and, as a member of the G4 Alliance, we advocate on behalf of the neglected surgical patient. We unequivocally supported WHA Resolution 68.15 and are proud to be one of 5 non-state actors in official liaison with WHO highlighted in the progress report.

The WFSA commends those states that have initiated assessments in support of the development of national surgical, obstetric and anaesthesia plans, and urges others to do the same. For our part we have worked across all 5 fields of the roadmap including agreeing a Global Position Statement on Anaesthesiology and UHC highlighting the essential leadership role of anaesthesiologists working alongside non-physician anaesthesia providers, anaesthesia training and education programmes in all 5 continents, the updating of the International Standards for a Safe Practice of Anaesthesia, the development of a tool for assessing anaesthesia capacity, our support for ketamine and oxygen as essential medicines and the publication of a global survey of the anaesthesia workforce alongside an interactive online workforce map.

Despite these national and organisational efforts we remain concerned by the lack of funding for this area of global health. Each year more than 4 times as many people die from conditions that could be treated by surgery and anaesthesia than die from HIV, Tuberculosis and Malaria combined, yet surgery and anaesthesia remains massively underfunded.

Pending this urgently required shift in global health financing we are determined that this Resolution remains high on your agenda and therefore call upon the WHA to approve biennial reporting against the Resolution and to ensure that the relevant indicators – such as POMR and surgical workforce density – are collected by all member states.

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