

In Response

We thank Hubbard et al¹ for their interest in the World Federation of Societies of Anaesthesiologists (WFSA) Global Anesthesia Workforce Survey.² We agree that much needs to be done and there are many good examples of projects aimed at improving anesthesia and surgical care in low- and middle-income countries (LMICs).

The WFSA not only offers fellowships for anesthesiologists working in LMICs but also a range of other educational programs.³ These programs facilitate exchange of knowledge and include the provision of short subspecialty courses, eg, SAFE Obstetric Anaesthesia and SAFE Paediatric Anaesthesia, a scholarship program to allow anesthesia providers to attend important regional conferences, and publications such as Update in Anaesthesia and Anaesthesia Tutorial of the Week, both available for free download.⁴

Lifebox⁵ not only distributes robust, low-cost oximeters in LMICs but also offers an educational package aimed at improving anesthesia and surgical safety. Specific initiatives include introduction of the World Health Organization Surgical Safety Checklist and a program to reduce surgical site infection.

We agree that we need more research on global anesthesia and surgical issues. It is essential that we “map the gap.” The WFSA Global Anesthesia Workforce Survey will continue to monitor the anesthesia workforce as we attempt to “fill the gap.” Since the publication of our article,¹ data have been obtained for a further 37 countries, bringing the total number of countries to 190. The up-to-date survey is available online⁶ and we encourage additions or corrections to the workforce data.

The International Anesthesia Research Society and *Anesthesia & Analgesia* are making a significant contribution to information sharing about global anesthesia issues. A WFSA session has become a regular part of the International Anesthesia Research Society Annual Meeting and the Global Health section of *Anesthesia & Analgesia*, under the editorship of Dr Angela Enright, is publishing an

increasing number of articles written by authors from both high-income countries and LMICs.

There is much to do but we are making progress.

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DOI: 10.1213/ANE.0000000000002643