



The European Society of
Regional Anaesthesia & Pain Therapy
Crossing Boundaries, Transforming Care

Welcome to ESRA Updates

January 2025 | Issue 17



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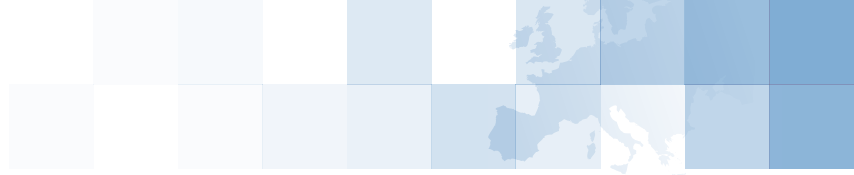
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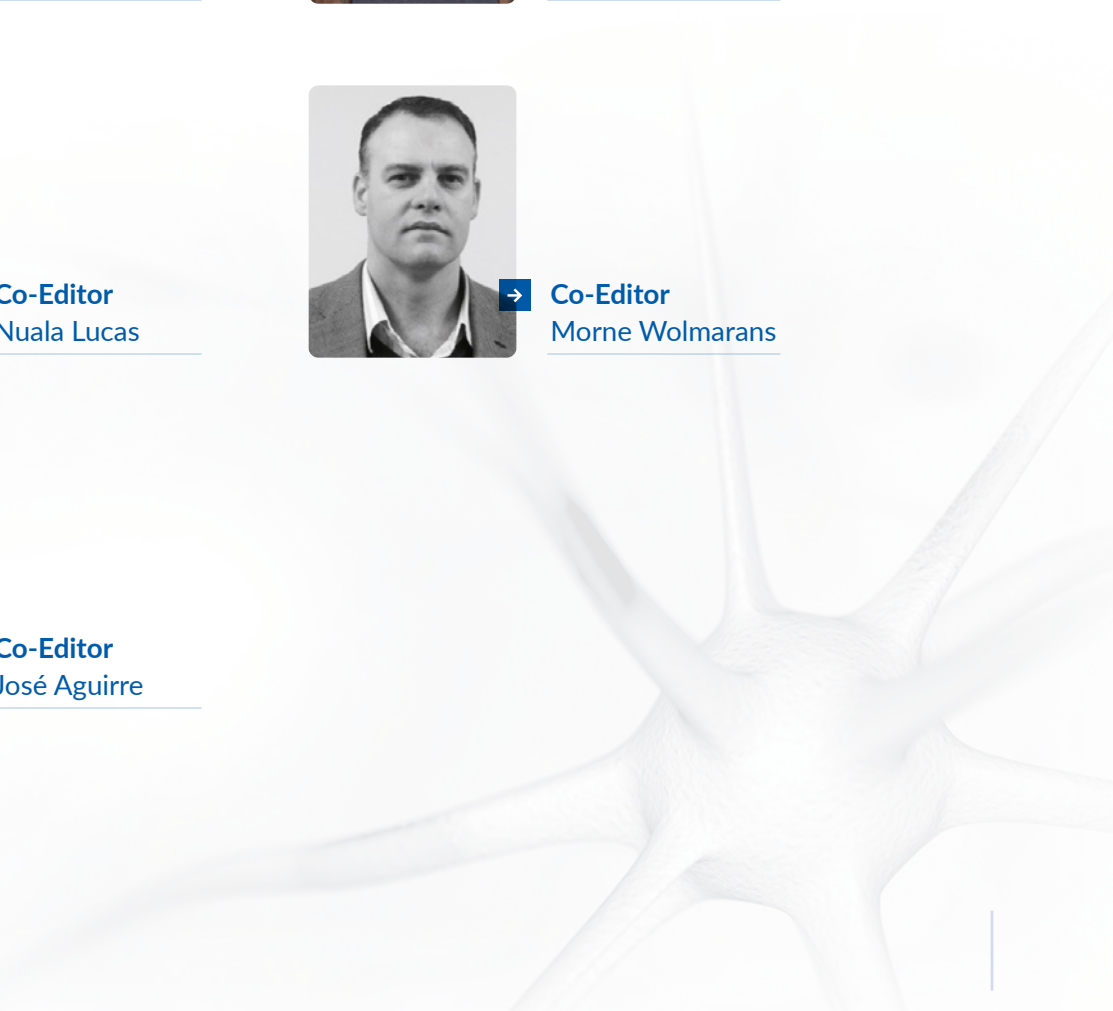
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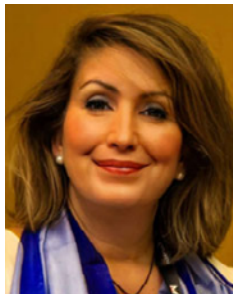
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Editorial: Wrapping Up 2024 and Welcoming New Horizons for ESRA



Eleni Moka (ESRA President, Creta Interclinic Hospital, HHG - Heraklion-Crete, Greece) @mokaeleni



«As we reflect on a truly extraordinary year, let us celebrate our achievements, acknowledge the challenges we have faced, and embrace the opportunities ahead.»

Dear Colleagues, Dear Friends,

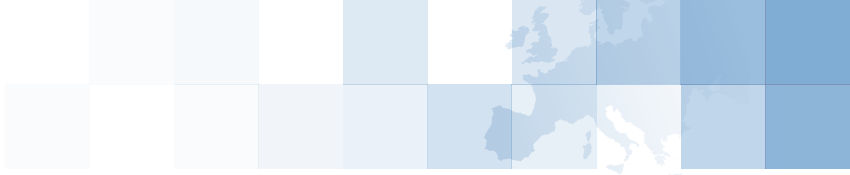
As a new year begins, it is the perfect moment to reflect on an extraordinary 2024 and to look ahead with excitement, anticipation, and optimism to 2025. Altogether, within the ESRA family, we have celebrated remarkable milestones, surmounted challenges, and strengthened the foundation of our Society for an even brighter future.

This year has been transformational for ESRA. Our membership has expanded substantially, currently encompassing 8,500 members, a true testament to our global reach, influence and the trust placed in our Society. We have also expanded our network to over 35,000 followers, a powerful indication of the growing interest and enthusiasm for Regional Anaesthesia, Perioperative Care, and Pain Medicine worldwide. Through our educational activities, congresses, and workshops, we have impacted the lives of over 24,000 participants, a resounding testament to our unwavering commitment to excellence, and our most important goal, the provision of excellent care for our patient populations.

One of this past year's crowning achievements was undoubtedly the 1st World Week and 1st World Day of Regional Anaesthesia and Pain Medicine, held last January. This global initiative brought together over 14,000 participants from 140+ cities across all continents, under the theme "Joining Hands for a Pain Free Future Worldwide". With the steadfast collaboration of our sister societies – ASRA Pain Medicine, LASRA, AFSRA, and AOSRA-PM, this event truly embodied and epitomized unity, enthusiasm, inclusivity, and the shared dedication that defines the ESRA family.



The ESRA Major Officers, Executive Board and Council of Representatives reunited in Prague before the 41st ESRA Annual Congress



The ESRA Annual Congress, in Prague, last September, set new standards and established a benchmark of scientific excellence. It was a resounding success, welcoming nearly 2,500 participants, in a celebration of innovation, collaboration, exchange of ideas and knowledge, through stellar scientific sessions, hands-on workshops, and invaluable networking opportunities. As we look ahead to the 2025 Congress in Oslo, we remain committed and steadfast to our vision of “Crossing Boundaries and Transforming Care” for patients worldwide.

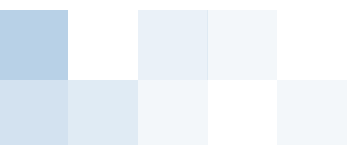
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This year marked a significant step forward for ESRA, as we refreshed our identity, with the unveiling of our new logo and emblem, a vibrant visual representation of our redefined vision, mission, core values and principles. This rebranding marks a pivotal step in ESRA evolution, reflecting our dynamic, progressive, forward-thinking approach, while honouring our rich history and cherishing our heritage. This new identity embodies our commitment to innovation, collaboration, and equity in healthcare, as we strive to break down barriers to ensure that every patient has access to the highest standards of care.

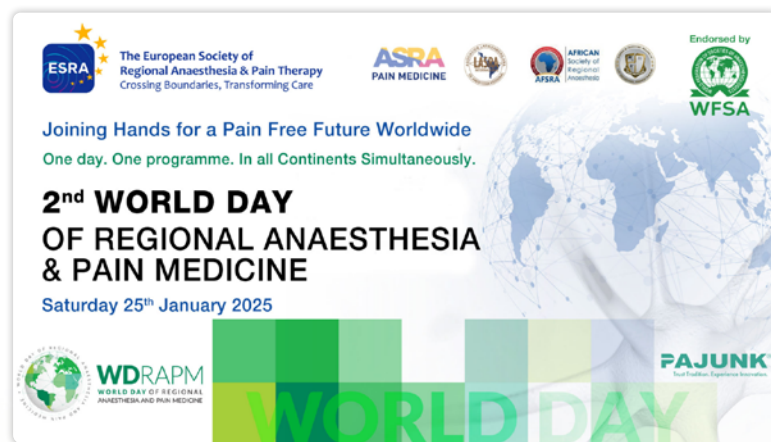
At ESRA, we believe that diversity, equity, and inclusivity are not just words but foundational principles that drive everything we do, reaffirming our dedication to equitable healthcare with the provision of optimal education and knowledge dissemination. Through professional empowerment and global partnerships, we have aimed to bridge disparities and provide every patient, regardless of geographic location or circumstance, with safe, effective, and standardized care. Our achievements in 2024 are firmly rooted in the “ESRA Roadmap to Excellence” – a clear, ambitious framework that guides our actions and strategy and sets the foundation for a brighter future.

Reflecting on our journey, we draw strength and vision from the remarkable legacy of our predecessors, who laid the foundation for our society. Standing on the shoulders of giants, we are moved and guided by their wisdom, unwavering dedication, and invaluable counsel, as we continue to build upon their achievements. We cherish our heritage, forge meaningful connections across generations, and seamlessly bridge the past with the future to ensure our mission flourishes for decades to come. A significant milestone in preserving this legacy has been the release of ESRA’s inaugural history booklet, which is set to be refined and enhanced in the coming months.

None of these achievements would have been possible without the hard work, tireless dedication, and unwavering commitment of our entire team. From the Council, Board, and Major Officers to the ESRA Office Staff, Working Groups, and Committees, as well as our incredible Members and Followers, your passion, professionalism, and collaboration have been the cornerstones of our success.



Looking ahead, we are thrilled to invite you all to the 2nd World Week (18 – 25 January 2025) and 2nd World Day (25th January 2025) of Regional Anaesthesia and Pain Medicine taking place in January 2025. With the participation from 200 cities across all continents, and a collaboration with our sister societies, this global initiative will once again unite us in our shared mission to enhance patient care globally.



The 2nd World Day of Regional Anaesthesia & Pain Medicine

At the heart of our plans for 2025 is a focus on digital transformation. By modernizing ESRA Academy and leveraging innovative tools, we aim to expand access to education, foster meaningful partnerships, and deliver impactful learning experiences for professionals worldwide.

As we reflect on a truly extraordinary year, let us celebrate our achievements, acknowledge the challenges we have faced, and embrace the opportunities ahead. Together, as the ESRA family, we will continue to achieve remarkable milestones, driven by inspired people and our shared values of Collaboration, Excellence, Innovation, Integrity, and Teamwork.

On behalf of the ESRA Major Officers and Executive Board, we wish you and your beloved ones, a happy, healthy, fulfilling new year. May this season inspire us all to continue our mission to create a Pain Free Future together.

We are all looking forward to welcoming you all in the 2nd World Week and 2nd World Day of RA and Pain Medicine, and to seeing you in person in Oslo next September!

Thank you for being part of the ESRA Family.
Here's to new horizons and even greater achievements in 2025!

A New Look for the New Year: Behind the Scenes of the ESRA Logo and Emblem Redesign



Eleni Moka (ESRA President, Creta Interclinic Hospital, HHG - Heraklion-Crete, Greece) @mokaeleni



**The European Society of
Regional Anaesthesia & Pain Therapy**
Crossing Boundaries, Transforming Care

A New Era: Unveiling the ESRA Refreshed Visual Identity

As we prepare to embark on another year of innovation and collaboration, we feel extremely proud to having unveiled the new logo and emblem of the European Society of Regional Anaesthesia and Pain Therapy (ESRA). This redesign represents a significant milestone in our history and marks a pivotal step in aligning our visual identity with our society's evolving vision, mission, core values & principles, as well as ambitious plans for the future.

The decision to redesign our logo was not taken lightly. This transformative journey began three years ago and was sparked by a clear vision: to modernize our emblem, while preserving the rich legacy that has defined ESRA for the last 45 years. Since its establishment in 1980, ESRA has been at the forefront of advancing Regional Anaesthesia, Perioperative Care, and Pain Medicine across Europe and beyond. For decades, the previous logo stood as a trusted symbol of our commitment to excellence, education, and collaboration.

However, as ESRA continues to grow and modernize, the need for a refreshed identity became not only clear, but true evidence—a design that would honour our legacy, while embracing a contemporary and forward-looking perspective. Our new logo symbolizes who we are today, reflecting our dynamic and innovative spirit, and where we aim to go in the future. It marks a pivotal step in our enduring mission to inspire, connect, and lead the global community in Regional Anaesthesia, Perioperative Care and Pain Medicine.



The Inspiration and our Philosophy Behind the Redesign

Our new logo is not just a symbol; it is a contemporary, dynamic and carefully crafted representation of the ESRA essence and identity. At its core, the carefully selected design integrates several key elements:

Foundation and Legacy: Drawing inspiration from our 45-year history, the redesign retains foundational elements of the original emblem. The rectangular and circular shapes symbolize stability, unity, and interconnectedness—qualities central to the ESRA mission and role in the global Anaesthesia and Pain Medicine community.

A Unified Shape: The circular motifs represent the global community of healthcare professionals that ESRA brings together. They emphasize inclusivity and perseverance, both fundamental to our vision.

Modern Typography: The bold, clean, and streamlined lettering conveys clarity, professionalism, maturity, and trustworthiness, ensuring that ESRA remains synonymous with excellence and trust. The spacing and softened edges of the characters ensure readability, even at smaller sizes, while projecting approachability and dynamism.

Subtle Symbolism: The design elements subtly reference Regional Anaesthesia and Pain Medicine, with a focus on precision, safety, and care—the hallmarks of our specialty.

Symbolism in Shapes: Concentric circles in the logo represent wholeness, processes, and the interconnected nature of Regional Anaesthesia and Pain Medicine. They have replaced the hexagonal motifs (inspired by medicines chemical structures) that were included in our previous logo, currently aiming to nod balance and harmony.

Stars of Excellence: Reflecting the European flag's symbolism, the logo features five-pointed stars, representing perfection, unity, solidarity, and humanitarian values. Their arrangement modernizes the logo, while respecting European standards and the identity of ESRA as a leading society in Europe and beyond.

Colours that Speak: The blue and yellow palette conveys stability, wisdom, optimism, and hope. These colours align with the ESRA vision & mission to inspire, empower, and enhance patient care through education, research, and collaboration.

RECTANGULAR FORM WITH ROUNDED CORNERS:

Stability, security, family feeling, and openness

CONCENTRIC CIRCLES:

Dynamism, processes, interrelationships, wholeness. Symbol of throbbing pain

COLOURS:

*Blue – stability, serenity, inspiration, and wisdom
Yellow - enthusiasm, joy, happiness.
White – optimism, purity, perfection, honesty*

STARS:

Unity, hope, humanitarianism, inspiration to people, energy, and enlightenment

STYLE:

Classic, timeless design that stand the test of time

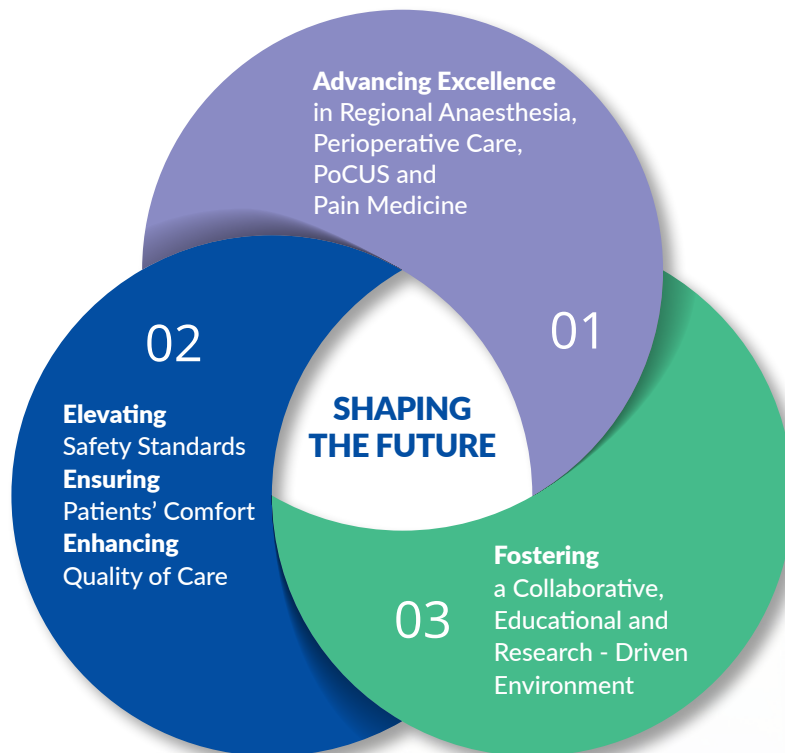
UPPER CASE LETTERS:

Authority, sense of trust, and reliability



More Than Just a Logo: Looking to the Future

The new ESRA logo is more than a refreshed design; it symbolizes a new era for ESRA family. It represents our commitment to growth, sustainability, and inclusivity as we strive to expand our impact across the globe. It embodies our dedication to shaping the future of Regional Anaesthesia and Pain Medicine through excellence, education, research and collaboration. It symbolizes our commitment to champion innovation, while respecting the traditions that have brought us here. This visual transformation is a statement of our readiness to embrace new challenges and opportunities, further cementing ESRA's position as a trailblazer in our field.



This transformation is also a response to the demands of an evolving global healthcare landscape. As ESRA continues to grow and expand its impact, the new logo represents our ability to lead, connect, and inspire healthcare professionals worldwide.

This fresh identity will accompany the society staying true to our core values and fundamental principles. We invite you to celebrate this milestone with us as we integrate our new logo across all platforms and materials. From our publications and digital presence to certificates, banners, and environmental applications, the logo will serve as a constant reminder of our mission and vision.

Entering 2025, we are proud to carry forward an identity that honours and cherishes our past, while propelling us into the future. Let this new logo inspire us to achieve greater heights, push boundaries, foster stronger connections, and continue transforming patient care together.

Thank you for being an integral part of the ESRA journey—past, present, and future.
ESRA Family: Crossing Boundaries, Transforming Care

ESRA Webinars: From Crisis to Tradition - The Legacy Lives On (and Keeps Us Smiling!)



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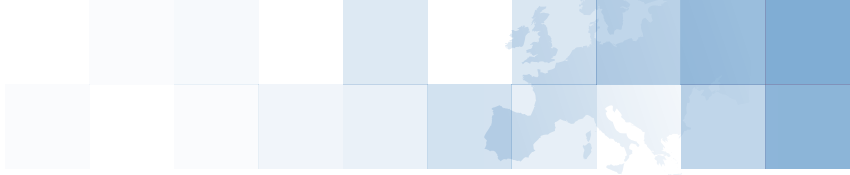


«I'm thrilled to have an amazing team by my side: Svetlana, Sari, Roman, and Alan [...]. Together, we're planning even more engaging and innovative sessions that will keep you coming back for more.»

Let's rewind a bit. It was July 30, 2020 — the world was in lockdown, and instead of planning our next vacation, our “travel plans” involved going from home to hospital and back, deeply immersed in caring for the sickest patients. Amidst the chaos, we launched the first-ever ESRA webinar, aptly titled “Pain Management in the Age of COVID.” It was a lifeline for our community when we all needed connection, a bit of humor, and a break from the endless N95 mask wearing.

And wow, what a journey it's been since then! We haven't missed a single month, hosting a webinar on the last Thursday of the month like clockwork (even if it meant staying up late or waking up at dawn — caffeine is our true hero here). That's 12 webinars a year, each with 1 CME credit, and best of all — it's free! It's like your favorite streaming service, but with less binge-watching and more brain-boosting.

The response has been incredible. We've averaged 700 participants per session, filling a virtual room with folks from every corner of the globe — from Europe to the Americas, from Asia to Africa (though we admit, Europe seems to have the biggest fan base at 60% attendance — must be the continental charm!). These webinars have become a crucial tool for sharing top-notch science and research, especially to colleagues in places where access to such resources can be limited. We're basically democratizing knowledge, one session at a time.



And now, the plot thickens. I'm no longer running this show solo. I'm thrilled to have an amazing team by my side: Svetlana, Sari, Roman, and Alan. We're like the "Fantastic Five" of webinars — each bringing our own superpower (and maybe a bit of mischief). Together, we're planning even more engaging and innovative sessions that will keep you coming back for more.

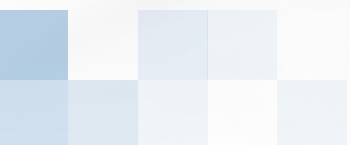
Let's also not forget our hidden heroes behind the scenes: Jeremy and Vivien. They are the wizards of IT, broadcast, and organization, making sure everything runs smoothly (while keeping us from accidentally muting ourselves or starting a session without the slides). Without them, we'd probably still be trying to figure out how to share our screen.

So, what's next? Expect even more dynamic topics, expert insights, and yes, maybe a joke or two (we can't help it!). We're excited about the future of ESRA webinars and can't wait to see where this journey takes us next.

Join us each month, bring your questions, and don't be afraid to stay a little longer if we go over time — we know you're probably enjoying this from the comfort of your sofa (or hospital call room, we get it).

Here's to more laughter, learning, and lively discussions. See you at the next webinar — we'll bring the science, you bring the coffee (or even something stronger)!

Clara Lobo



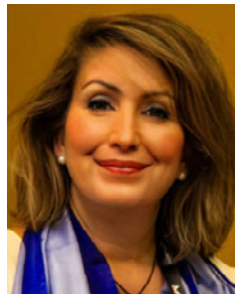
ESRA 2024 Highlights: Achievements, Milestones, and Memories



Eleni Moka (ESRA President, Creta Interclinic Hospital, HHG - Heraklion-Crete, Greece) @mokaeleni



Thomas Volk (ESRA Past-President, Saarland University Hospital, Germany) @ThomasVolk16



«Together, we are building a future defined by innovation, progress, and a shared commitment to creating a pain-free world.»

Q1 Looking back on 2024, what's one ESRA achievement that makes you want to say «opa!» with pride?

I am overwhelmed with immense pride as I reflect back on the extraordinary milestones ESRA achieved in 2024 - a truly transformative year that marked a new chapter of growth, innovation, and renewed purpose for our society.

Among the many accomplishments, one stands out as a defining moment: the [unveiling of the new ESRA logo](#). This sleek, vibrant, and dynamic emblem is far more than a visual update—it is a powerful symbol of the evolution of our society, reflecting our unwavering and steadfast commitment to excellence. This bold and refreshed ESRA visual identity captures the essence of who we are, perfectly encapsulating our modern, forward-thinking, and inclusive character, while honouring the rich heritage of our past. It is more than just a new design—it is a beacon of inspiration, embodying our relentless pursuit of innovation and radiating our spirit of collaboration. Witnessing the energy and enthusiasm with which our members have embraced this transformation fills me with immense pride and makes me want to shout a resounding «opa!»—a heartfelt Greek expression of joy and excitement!



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This milestone was accompanied by the redefinition of [ESRA vision, mission, principles, core values, and strategy](#), paving a clear, inspiring, and forward-looking pathway for our future. These updates are more than words, symbols, or lofty ideals; they signify a renewed sense of purpose and ambition, as well as a revitalized spirit of unity and drive, that energizes our community and reinforces our commitment to advancing the field.

Another highlight of 2024 was embarking on an extraordinary journey into ESRA origins, through the release of the preliminary version of the [ESRA history book](#). This initiative connects us with the legacy of the pioneers who laid the foundations of this remarkable society and secured our success, reminding us of the importance of cherishing our roots, while forging ahead into the future.

2024 has been a year of perfect harmony between reflection and progress—a year that honours our past achievements, while boldly embracing the limitless opportunities ahead. It reaffirms the very essence of why we unite as a society: to innovate, to inspire, and to push boundaries that enable us to transform care. Together, we are shaping a future where pain-free care is not just a vision but a universal reality. This transformative journey firmly positions ESRA at the forefront of Regional Anaesthesia and Pain Medicine, leading the way towards groundbreaking advancements and global impact.



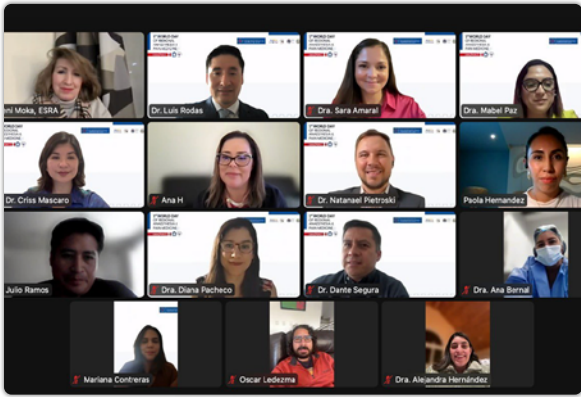
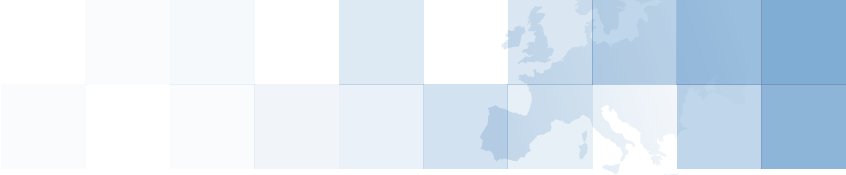
Q2 As President, what's one bold, «outside the box» move that you think pushed ESRA forward this year?

One truly bold, visionary, and groundbreaking initiative that propelled ESRA forward was the launch of the 1st World Week and 1st World Day of Regional Anaesthesia & Pain Medicine at the beginning of 2024. This unprecedented global event, co-organized by the five continental RA and Pain Medicine sister societies (ESRA, ASRA Pain Medicine, LASRA, AFSRA, AOSRA-PM), was held under the inspiring theme “Joining Hands for a Pain-Free Future Worldwide.” It united more than 14,000 healthcare professionals from diverse cultures and across all continents, rallying them around a shared purpose: advancing patient-centred care with compassion and humanity.

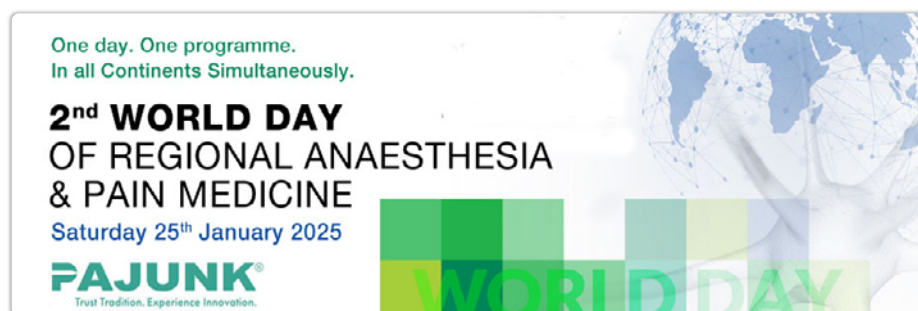
This extraordinary day was far more than a showcase of clinical expertise—it was a celebration of the core values that define ESRA: collaboration, inclusivity, and innovation. It marked a transformative moment where professionals from a vast array of backgrounds came together to exchange ideas, share knowledge, and reinforce the global community dedicated to alleviating suffering and improving lives.







By breaking both geographical and cultural barriers, this initiative demonstrated ESRA's boldness and vision in thinking far beyond traditional boundaries. It redefined leadership, proving that through unity and compassion, we have the power to inspire meaningful, worldwide change. This pioneering effort not only positioned ESRA at the forefront of advancing Regional Anaesthesia and Pain Medicine but also set a new standard for how we connect and how we can focus on partnerships as a global medical community.



Building on this momentum, the 2nd World Week & 2nd World Day of Regional Anaesthesia and Pain Medicine will be held once again in January 2025. This next chapter promises to expand its reach, engaging even more cities and participants worldwide, and further solidifying ESRA role as a global leader in fostering education, innovation, and a collective commitment to a pain-free future.

Q3 What advice would you give yourself if you could go back to January 2024, on the brink of another ESRA adventure?

If I could return to January 2024, I would remind myself to embrace this extraordinary journey with patience and unwavering trust in the transformative power of collaboration. Every challenge, no matter how daunting, holds an opportunity for growth, and the collective strength of our society will always prevail, ensuring we can overcome any obstacle. Leading an organization like ESRA is both a profound responsibility and an incredible privilege; it is similar to navigating in a complex landscape but also offers the opportunity of being surrounded by and working alongside exceptional individuals, who share the same vision of advancing Regional Anaesthesia and Pain Medicine.

As such, while reflecting back, I would encourage myself to be bold in vision, remain steadfast in commitment, and place trust in the remarkable team of colleagues and members who not only share this passion but also bring the vision to life. Together, there is no goal too ambitious, no boundary we cannot cross, and no future we cannot shape!

Leadership is as much about vision and action as it is about learning. Mistakes are inevitable, but they are also powerful teachers. If I could offer myself one piece of advice, it would be to approach missteps with humility and a problem-solving mindset. Acknowledge them, learn from them, and use those lessons to improve and inspire. True leadership lies in how we adapt and move forward stronger.

Above all, I would remind myself to celebrate with all the team members the small victories along the way, as they are the building blocks of larger successes. And to trust deeply in the extraordinary individuals who make up ESRA—they are the heart of our achievements and the driving force behind our shared vision of advancing Regional Anaesthesia and Pain Medicine for a pain-free future.

Q4 If you had to describe ESRA's 2024 journey using a classic Greek myth, which one would it be, and why?

Rather than a myth, I would draw inspiration from a historical period of ancient Greece—the Golden Age of Pericles in ancient Athens. This extraordinary era symbolizes unparalleled cultural and intellectual growth, collaboration, and the laying of foundations that would inspire generations to come. Similarly, the ESRA journey in 2024 has been defined by innovation, unity, and the creation of a lasting legacy for the fields of Regional Anaesthesia and Pain Medicine.

Under Pericles leadership, Athens flourished as a beacon of creativity and progress, not through the efforts of one individual but through the collective contributions of its people. In the same way, ESRA accomplishments this year were made possible thanks to the dedication, collaboration, and shared vision of our diverse and committed community.

The Golden Age of Pericles reminds us that true progress is driven by people—their ideas, passion, and dedication to a common purpose. Similarly, ESRA accomplishments this year reflect the extraordinary efforts of its members and leadership, who worked tirelessly to advance patient care, foster innovation, and promote unity across our global fields of interest.

This has been a transformative year, one that sets the stage for an enduring legacy in Regional Anaesthesia and Pain Medicine—much like Athens under Pericles laid the groundwork for centuries of cultural and intellectual advancement. Our diverse members, representing countries and backgrounds from around the world, have shared their strengths, wisdom, and resilience, embodying the spirit of perseverance and collaboration that defined Periclean Athens. Together, we have navigated through challenges and moved closer to our shared vision of excellence.

As we reflect on 2024, it is clear that our collective achievements have made this a pivotal and inspiring year for ESRA. Together, we are building a future defined by innovation, progress, and a shared commitment to creating a pain-free world.

Q5 What's the legacy of your presidency that you hope will continue to inspire ESRA members for years to come?

The legacy I hope to leave is one of connection, empowerment, and celebration of diversity—a society that not only unites individuals across borders but also embraces the unique perspectives that each member brings. My presidency has been about fostering a sense of purpose and collaboration within ESRA, laying a foundation that ensures our society not only evolves with the times but also leads the way in advancing Regional Anaesthesia and Pain Medicine on a global scale.

I hope future generations of ESRA members will look back at this period as one that embraced innovation and inclusivity, marked by milestones such as the World Day of Regional Anaesthesia and Pain Medicine, which united over 14,000 professionals worldwide. This event exemplified how ESRA can break barriers, connect diverse communities, and inspire shared progress. I also hope future generations of ESRA members will continue to honor the value of diversity, seeing it as a source of strength that drives progress and enriches our shared mission.

Equally, I envision a legacy of enduring values—of redefining our vision, mission, and strategy to ensure ESRA remains at the forefront of excellence and relevance. These updates symbolize a renewed commitment to the principles of education, patient-centred care, and global collaboration, which are the heart of our society.



Eleni Moka at the Opening Ceremony (41st ESRA Annual Congress in Prague, 4 September 2024)

Above all, I hope my presidency will inspire members to believe in the power of collective effort and to continue pushing boundaries, challenging norms, and creating a future where pain-free care becomes a universal reality. My greatest wish is that ESRA remains a vibrant, innovative, and inclusive society that empowers its members to make a profound impact in their fields, for the benefit of patients and communities worldwide.



«ESRA has expanded significantly, and with that growth comes the realization that we are now the largest global society for Regional Anaesthesia and Pain Medicine»

Q1 Reflecting on 2024, what's one milestone that makes you say 'wunderbar' about ESRA's progress?

Organizing our annual congress in Prague was a remarkable experience, especially as it was my first time leading the scientific program. I knew it would be a challenging task, even down to the very last minute. I vividly recall sitting in the hotel lobby, handling unexpected changes while familiar faces from the ESRA family arrived. Seeing my struggle, many came up to me and said, "Whatever you need, we're here to help." It was a true testament to the camaraderie within our society.



Thomas Volk at the Opening Ceremony (41st ESRA Annual Congress in Prague, 4 September 2024)

Q2 Having passed the torch, what's one unexpected lesson from your time as President that came in handy this year?

ESRA has expanded significantly, and with that growth comes the realization that we are now the largest global society for Regional Anaesthesia and Pain Medicine. In the past, we could rely heavily on friendship and individual dedication. However, as our organization grows, we must adapt and strengthen our professional structures. The extra hours of volunteer effort are becoming more difficult to sustain.

Q3 If ESRA's 2024 was a piece of German engineering, what would be the most innovative part?

I'm not sure German engineering is as reliable as it once was! Perhaps the most innovative part of ESRA in 2024 is our shift towards a lighter, more engaging approach. Instead of striving for perfection, we're embracing a culture of learning through enjoyment—an approach that may prove to be more effective than any meticulously engineered plan.

From Vision to Victory: Celebrating ESRA-DRA Success



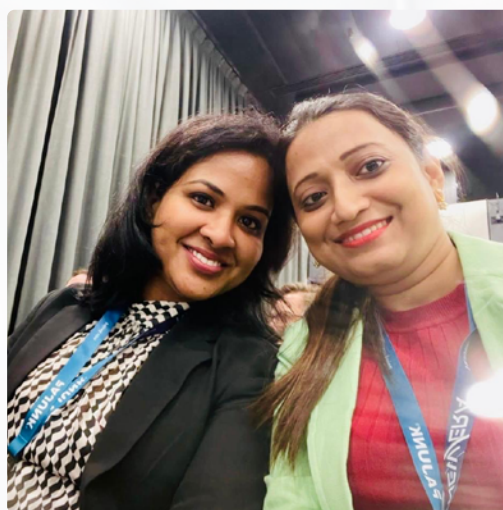
Eleni Moka (ESRA President, Creta Interclinic Hospital, HHG - Heraklion-Crete, Greece) @mokaeleni



«Having succeeded in my personal desire to learn the nuances of regional anesthesia, I strongly feel that sharing the knowledge gained is the best way to consolidate my grounding in this field.»

Aspiration to pursue ESRA-DRA certification was indeed a turning point in my career. The quest to change my curiosity to competence drove me through this journey. Facing a whole new deeper world of regional anesthesia after the completion of my Masters in Anesthesiology in 2017 made me realize that I was superficial in my skill base and knowledge. Thanks to my current stint in Rashid Hospital-Dubai, a high-volume government Polytrauma Centre, my desire to reach the depth of science in the field of regional anesthesia got reinforced. Working in such a Centre accelerated my pursuit for competence in regional anesthesia. It was at that point I found ESRA-DRA as the perfect launch pad for my quest to learn not only the “how” but the “why” behind the science of regional anesthesia.

Initiated the journey by registering with ESRA and got the opportunity to explore their vast video archive. There extensive educational repository not only deepened my insight and understanding of complex blocks but also provided tips for my daily practice. There expansive teaching collection gave the right gain and focus into my practice. To top it up, participation in comprehensive, pragmatic and fulfilled ESRA workshops was a bonus to my confidence and zeal during my successful journey. This compounded with what I learnt from my senior colleagues in my Centre fast tracked my progress.



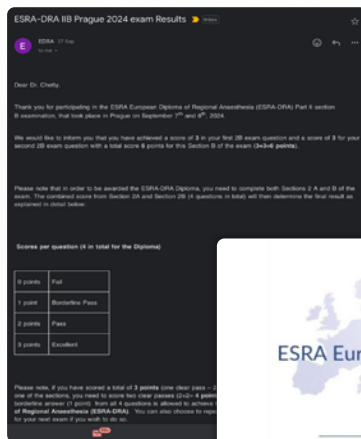
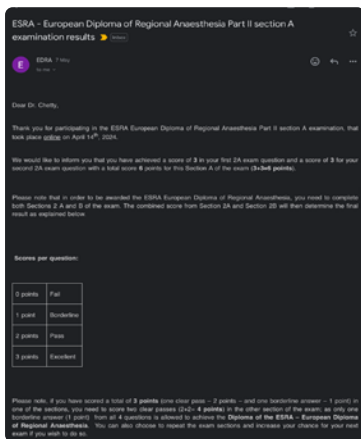
Spending endless hours scanning patients, volunteers, tweaking my techniques, implementing the learnings from ESRA and my senior colleagues was no longer an arduous task. Prep work was demanding but incredibly rewarding. As a testimony of the hard work and dedication poured, I secured excellent result of a 3+3 in ESRA-DRA part 2A and 2B. ESRA-DRA part 2A viva reminds of the anxious fun I had while rattling through the limited time. I still remember how my examiner Dr Peter Merjavý appreciated my performance when we met in ESRA conference following the exam, that I spoke one hour's content in a 4x speed.

Having succeeded in my personal desire to learn the nuances of regional anesthesia, I strongly feel that sharing the knowledge gained is the best way to consolidate my grounding in this field. Through this voyage many of my colleagues and trainees reached out to me for guidance to ESRA-DRA examination. Their keenness to pursue ESRA-DRA certification and looking forward to my guidance and support reflects the respect and recognition the course commands globally amongst the Anesthetists fraternity. I feel overwhelmed by this calling. Being passionate about teaching, successful completion of the course is bound to help in my endeavors of guiding the trainees in their anesthesia learning.

Having qualified in EDAIC and FCAI exams earlier and having trained international anesthetists for these exams, achieving the ESRA-DRA has opened another door to participate as regional anesthesia workshop faculty at international conferences. I am incredibly grateful to my department heads – Dr Mansour M Yousef, Dr Hany F Greiss, Dr Osama Sami M Alani and senior colleagues for their encouragement and support through this journey.

Reaching this milestone would have been impossible without the enduring support of my husband, parents, sister and kids. Their unconditional love, encouragement and belief in me boosted to surpass every challenge enroute. A special shout out to my dear friend Dr Amrita Rath – her teaching, support and preparing together was phenomenal and receiving the ESRA-DRA certification together felt like a shared victory. I am deeply thankful to Dr Elayavendhan Kuppusamy for his meticulously prepared presentations and masterclass.

Overall it's just not about earning the diploma but the overall rewarding experience in this journey of mine. I hope my journey with ESRA motivates my fellow anesthesiologists to push their limits, enhance their knowledge base, improve patient care, share their valuable insights and embark on achieving ESRA-DRA certification for a better TOMORROW.



Memories to Cherish: What I Learned at the ESRA Annual Meeting – Attendees’ Testimonials



Editorial team



We have asked you on social media to share things you learned at the 41st ESRA Annual Congress in Prague. Here are a few comments we received!



Watch Dr Tuhin's Top 3 Tips learned from ESRA 2024

Dr Tuhin is an Anaesthesiologist practising in Coimbatore, India. He is also involved in teaching and clinical training of Postgraduates and Regional Anaesthesia Fellows.



Roadmap to navigate your First Conference as a Resident and make the best of it: Go and attend the next ASRA Pain Medicine/ESRA meeting



Ibrahim M. Umer (St. Joseph University Medical Center, Paterson NJ, USA) @iumer9



«I hope to lay out a blueprint of things I learned on the conference circuit and how I went from not knowing anyone to developing incredible mentors, friends, and colleagues.»

Like many others, I spent a lot of time at my first few conferences as a resident walking around aimlessly, without any connections or mentors. I was the only one from my program attending these meetings and I often wondered if I was wasting my valuable time off, traveling around the country looking for guidance. In this short work, I hope to lay out a blueprint of things I learned on the conference circuit and how I went from not knowing anyone to developing incredible mentors, friends, and colleagues.

Step one: leverage your existing network. It may not seem like it, but you do have a network, even if your residency does not have a large department in chronic or acute pain. You went to medical school. You have professors, fellow alumni and classmates that are attending conferences and getting involved. Maybe a good friend's friend. Reach out to them. You might even get lucky and bump into them. I strongly urge you to attend a PBLD session where you will meet residents, fellows, young or seasoned attendings/consultants over lunch. It's a great opportunity to get to know people and pick their brains. At the very least, you get a meal!

Step two: understand what networking means. I didn't go to business school. I have a bachelor's degree in biology. I never had to network. I got good grades, did some volunteering, and got into med school. It's not a skill we are taught, but it can be learned. There's tons of books out there, especially in the business world, that teach you how to develop a network. I would often find myself busy with lectures, and trying to meet people during the day at these conferences, but noticed I always dreaded lunch because I had no plans and no one to eat with. I found a book, aptly titled "Never Eat Alone" by Keith Ferrazzi while waiting on a delayed flight to a conference. The book is chock-full of sometimes obvious, incredibly helpful, tidbits that helped to reframe what networking meant to me. Building a network is not about trying to figure out what people can do for you, it's about trying to show your value to people. Often, that starts with you doing work that will help them. Find a project (either on the conference message boards, through the Newsletter or community blogs, or through word of mouth) that someone interesting is working on, and find an angle that you are able to help them with. That may be recruiting participants, doing background research, or even just offering to spread the word. Demonstrate your value and interests. Do a good job. These people will remember you for their future endeavors.

Step three: seek out people doing what you want to be doing. ASRA/ESRA, and many other organizations, have dedicated tons of resources to developing resident initiatives. Talk to people serving on these committees. Ask them what they are working on, and what they need help with. It takes some legwork, but these people are incredibly helpful, knowledgeable, and can get you in touch with those doing what you want to be doing. Be open to dabbling in projects you didn't see yourself doing, you'll be surprised what opportunities come your way.

Step four: get connected. I'm not big on social media, but I do believe it is worth your time to create a professional presence. LinkedIn and Twitter come to mind. There you will see discourse amongst conference goers, and it will give you an opportunity to stay connected with them well after the conference is over. This way, every conference just becomes a way to meet people and begin a relationship. You can continue to foster that relationship throughout the rest of the year via social media.



Crowd at the 41st ESRA Annual Congress in Prague, 4-7 September 2024

Check Twitter regularly during conferences, and look up some of the speakers you were interested in. It will give you background information on what they are working on when you go talk to them.

Sign up for the ASRA mentor match program. This program is a complete game changer- you fill out a CV and list your interests and the committee puts you in touch with an attending who is a good fit as a mentor. This person has already been selected to assist you in your career goals. They are your advocate. I have been blessed with a very helpful, thoughtful, and intelligent mentor who has helped me with fellowship applications and essays, research, navigating residency, networking, and career guidance. This program may have been the single most important thing I learned from a conference, and I happened to attend by stumbling into a PBLD session.

Step five: stay true to yourself. Ferrazzi says in his book that networking comes in all shapes and sizes. For some, it's walking the exhibit halls and asking questions of presenters. For others, it's sitting by the bar during intermission and chatting up other people with the same lanyard. An important tip I learned from his book was to try to get a group together for a fun activity in the evenings. Whether that's going out to a nice restaurant, checking out the downtown, or a dinner cruise. Tell a few people, and have them invite a few people of their own. All of a sudden, you have a group of people whose brains you can pick — a network so try it out for yourself!

Conferences can be nerve-racking, especially if you don't know anyone and are early in your career. I hope these tips can assuage some of those fears. A lot of this may seem obvious, but I believe clearly defining a strategy goes a long way in making your time more productive. Once you get involved, these meetings become a lot of fun and you come away with much more meaningful relationships and projects. Get involved, have fun, and remember:

*"You can't get there alone. In fact, you can't get very far at all."
Keith Ferrazzi*

ESRA Newsletter Journal Club



Giuseppe Pascarella (University Hospital Campus Bio-Medico, Rome, Italy) @PascarellaDr

ESRA UPDATES Journal Club invites leading experts in (regional) anaesthesia to select one (or more) article(s) which for him/her were/are important, interesting or changed his/her clinical practice. This choice can be a general big randomized study but can also be very personal. For this edition our choice went to Dr Giuseppe Pascarella.

Dr. Giuseppe Pascarella is a distinguished expert in the field of anaesthesiology, recognized for his clinical expertise, innovative techniques, and contributions to advancing perioperative care. With a focus on optimizing patient outcomes through evidence-based practices, Dr. Pascarella is dedicated to the development and application of cutting-edge methods in regional anaesthesia and pain management. His commitment to education and mentorship has also established him as a respected leader in training the next generation of anaesthesiologists.

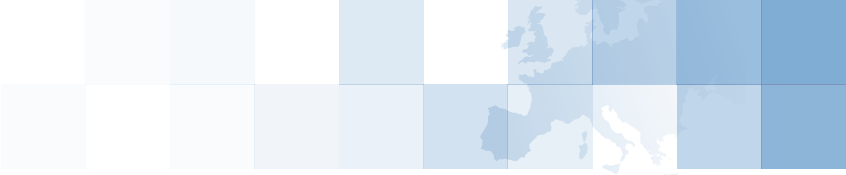
Dr. Giuseppe Pascarella



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I would like to share with you my recent interest in new insights about the use of adjuvant drugs for regional anesthesia. These drugs may not only extend block duration and postoperative analgesia but also reduce the effective local anesthetic (LA) dosage administered in single-shot blocks, with consequent less adverse effects. 1 Low-dose blocks do not only mean less systemic reabsorption but also a lower incidence of specific technique-related adverse effects: this is the case of brachial plexus block, where even standard dosages of local anesthetic give a high incidence (around 100%) of phrenic nerve block with consequent hemi-diaphragmatic paresis.

In this regard, I would like to report a recent randomized controlled trial by Kim Y and colleagues, investigating the use of low-volume local anesthetic ultrasound-guided superior trunk block combined with intravenous dexamethasone on 84 patients undergoing arthroscopic shoulder surgery. 2 They compared the interventional group (7 mL of perineural ropivacaine 0.5% + 0.15 mg/kg i.v. dexamethasone) vs. control group (15 mL of perineural ropivacaine 0.5% + i.v. saline solution). They found that the low-volume group was not inferior to the control group in term of analgesia duration, considered as the time between block completion and the onset of moderate postoperative pain (Numeric Rating Scale ³ 4). However, the treatment group showed a significant reduction of diaphragmatic paresis (45.2% and 85.4%), defined as a decrease in diaphragm excursion between 25% and 75%. Based on these results, although phrenic nerve block is asymptomatic in most of cases, it is reasonable to consider low-volume superior trunk block combined with i.v. dexamethasone an important option to manage analgesia in specific frail populations, i.e. morbidly obese or patients with severe respiratory conditions, undergoing shoulder surgery.



Novel adjuvants may also be combined to act synergically and maximize postoperative analgesia in fascial plane blocks. This is highlighted by Zeng et al. in their recent publications about the use of combined perineural dexamethasone and dexmedetomidine as adjuvants of transversus abdominis plane block for postoperative analgesia in gastric cancer patients.³

This large randomized controlled trial included 312 patients divided in 3 groups, depending on whether where TAP block was performed with dexamethasone, dexmedetomidine or a combination of both. Results showed that The combination of dexamethasone and dexmedetomidine as adjuvants for TAP block reduced the incidence of moderate-to-severe pain and pain score both on movement and at rest at 24 h, as well as morphine consumption. I think this study may also open an interesting debate regarding the use of off-label drugs like dexmedetomidine. Although its use is not officially approved by the major drug regulatory agencies, its efficacy and safety as a perineural adjuvant has already been assessed by different systematic review/metanalysis. ^{4; 5} However, at present most of the trials have been approved and conducted outside American and/or European institutions. Thus, it is reasonable to hope in a future worldwide extension of this research field in order to definitively explore the whole potentiality of dexmedetomidine.

Furthermore, the effect of adjuvants in prolonging analgesia has been established not only in peripheral blocks but also when applied to Local Infiltration Analgesia (LIA), as underlined by this recent network metanalysis by Schubert et al.⁶

According to their analysis, dexamethasone added to LA was shown to be the most effective adjuvant to prolong analgesia and recommended with a “moderate” level of evidence together with alfa-2-agonists (clonidine and dexmedetomidine). This conclusion may support the use of adjuvants as a good solution to reduce LA total dosage which is typically elevated in the context of LIA. In this case, LIA could be more easily associated with regional blocks to enhance postoperative analgesia without increasing the risk of systemic toxicity.

References:

1. Kirksey MA, Haskins SC, Cheng J, Liu SS. Local anesthetic peripheral nerve block adjuvants for prolongation of analgesia: A systematic qualitative review. *PLoS One* 2015;10:e0137312.
2. Kim Y, Yoo S, Kim SH et al. Comparison between low-volume local anesthetic with intravenous dexamethasone and conventional volume without dexamethasone for superior trunk block after arthroscopic shoulder surgery: A randomized controlled non-inferiority trial. *Reg Anesth Pain Med* 2024;49:558-564.
3. Zeng H, Yin F, Fan L et al. Combination of dexamethasone and dexmedetomidine as adjuvants of transversus abdominis plane block for postoperative analgesia in gastric cancer patients: A double-blinded randomized controlled trial. *J Clin Anesth* 2024;97:111543.
4. Vorobeichik L, Brull R, Abdallah FW. Evidence basis for using perineural dexmedetomidine to enhance the quality of brachial plexus nerve blocks: A systematic review and meta-analysis of randomized controlled trials. *Br J Anaesth* 2017;118:167-181.
5. Xu Y, Kong X. Safety and efficacy of dexmedetomidine in combination with local anesthetics for orthopedic nerve blocks: A systematic review and meta-analysis. *Minerva Anesthesiol* 2024;90:427-438.
6. Schubert AK, Wiesmann T, Wulf H et al. The analgetic effect of adjuvants in local infiltration analgesia – a systematic review with network meta-analysis of randomized trials. *J Clin Anesth* 2024;97:111531.