

Preface



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Guest Editor

After surgery, it was once thought, those patients who fared better simply tended to be those free of preexisting conditions. However, accumulating evidence shows that care decisions and events around the time of surgery not only influence patient outcome, but that they do so far after the perioperative period. These insights have informed recent patient safety initiatives and have attracted the attention of both health care providers and research scientists. They are of particular interest to anesthesiologists, inasmuch as they both redefine the impact that we as anesthesiologists can have on our patients in the short time that we care for them, and require us to explore in much more depth the effects of the perioperative process on surgical outcome. If we are successfully to meet this challenge by developing novel therapies and further improving the health care process, we must engage in constructive dialogs across our respective specialties.

This collection of monographs was designed to do exactly that—to convene national experts from patient safety organizations in anesthesia and surgery, clinical experts, and renowned scientists from diverse backgrounds to survey the larger organizational challenges, recent clinical progress, and the biology of this important area. Stressing the need for a joint approach, the opening article of this issue communicates the accomplishments, recent progress, and the future of patient safety from the perspective of the Anesthesia Patient Safety Foundation and the National Surgical Quality Improvement Program. To reflect the growing awareness of the role of the immune system in determining patient outcome, special emphasis has been placed on inflammation, inflammation resolution, and

immunity in the context of stress, nutrition, infection control, and other perioperative variables. Equally pertinent, however, are the discussions of pharmacological strategies for cardiac risk reduction, the potential association between volatile anesthetics and neurodegenerative diseases, and the impact of intraoperative monitoring on patient safety. It is our hope that this issue of the *Anesthesiology Clinics of North America* will begin to map this exciting new frontier, encouraging further explorations by research scientists and clinicians alike.

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