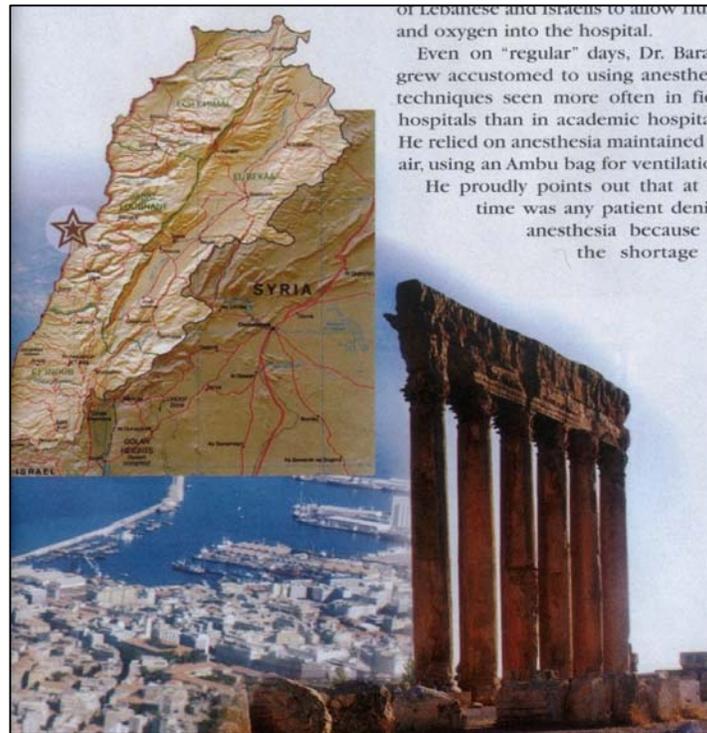
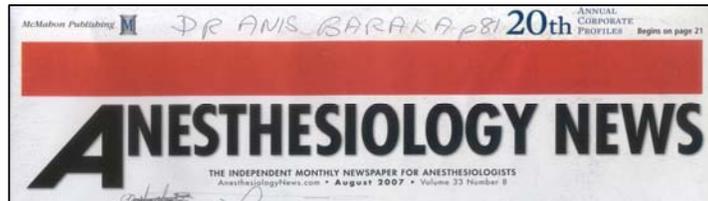


A DAY OF ANESTHESIA IN...
LEBANON: YEARS OF STRIFE HONE
SKILLS FOR TRAUMA ANESTHESIA *

JANINE GLEASON

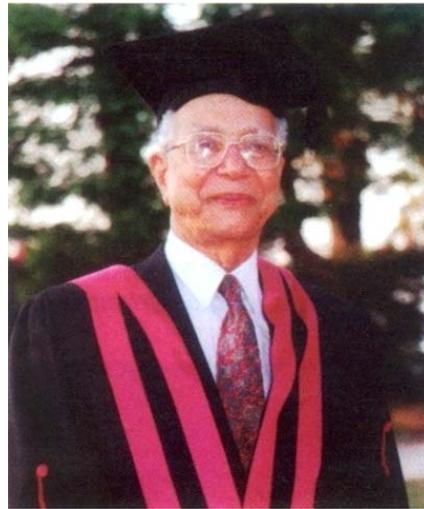


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* Printed with permission from *Anesthesiology News* Vol. 33 Number 8 August 2007 p. 81 & 86.

For 15 years, Anis Baraka, MD, the chair of anesthesiology at the American University of Beirut in Lebanon, slept most nights on a sofa in his office. Outside, civil war raged in the streets. Car bombs went off with disturbing regularity. Banks and businesses shut down, and once-beautiful buildings housed snipers. Most of Dr. Baraka's colleagues, including all the other department chairs at the university, departed Lebanon in the early stages of fighting, after the university had handed out termination letters that freed the staff to leave. Dr. Baraka's wife and four children were spirited away to Egypt, his home country, never to return. (Fig. 1)

*Fig. 1
Dr. Baraka wearing the uniform and
cap of the Royal
College of Anesthetists of London.*



During the worst years, Dr. Baraka received no salary. Yet he stayed. "I never considered leaving between 1975 and 1990 because I believed that taking care of traumatized people is our most important duty", he said.

Now 77 years old and still actively administering anesthesia as chair of the department, Dr. Baraka calls his decision to remain in Lebanon during the war his greatest achievement. Life was not easy. Living conditions were dangerous, and the working conditions exhausting. The hospital was often inundated with casualties. One day in 1975, some 200 casualties arrived at the operating room at one time. The trauma team

turned the postanesthesia care unit into a triage area and later into an intensive care unit to deal with the large numbers of patients—a strategy that they continue to use during times of mass casualties.

Over the years, hospital supplies arrived infrequently. Things grew worse in 1982 when Israeli-launched blockades of Lebanon severely curtailed access to essential supplies. During one blockade, Dr. Baraka found himself negotiating with armed groups of Lebanese and Israelis to allow fluids and oxygen into the hospital.

Even on “regular” days, Dr. Baraka grew accustomed to using anesthetic techniques seen more often in field hospitals than in academic hospitals. He relied on anesthesia maintained by air, using an Ambu bag for ventilation. He proudly points out that at no time was any patient denied anesthesia because of the shortage of resources. “Even with supplies of oxygen and nitrous oxide, we could still provide effective general anesthesia and get good results”, he said.

*Fig. 2, 3
Dr. Baraka work in the operating room at the American
University of Beirut Medical Center.*



Even on “regular” days, Dr. Baraka grew accustomed to using anesthetic techniques seen more often in field hospitals than in academic hospitals

During the worst years, Dr. Baraka decided that the rest of the world needed to know about the conditions in Beirut. He traveled to North America, Asia and Europe on a shoestring budget, often sneaking out of

Lebanon by boat to Cyprus or by car to Syria to lecture about his experiences with war anesthesia. He attended conferences and gave lectures during the day, saving money at night by staying in airports rather than in hotels. His one-man publicity drive led to a growing recognition of the situation in Lebanon and added considerably to the scientific understanding of war anesthesia. His efforts also helped woo a full medical faculty back to the university by 1988.

Yet the man who is known as the face of Lebanese medicine is not Lebanese. Dr. Baraka was born in a village in Egypt in 1930, studied medicine at the University of Cairo and eventually joined the faculty at the University of Cairo. In 1963, he moved to Liverpool, England, to study the effect of the partial pressure of carbon dioxide on muscle relaxants. He expected to eventually return to Egypt.

However, the American University in Beirut offered Dr. Baraka a spot in its fledgling anesthesiology department-which at that time was home to four residents and a handful of MDs and was dominated by nurse anesthetists. Dr. Baraka took the position and has never left the university. In 1976, he was appointed professor and chair of the department of anesthesiology, a post he has held for almost 30 years.

Fig. 4

Dr. Baraka with faculty and residents of the Department of Anesthesiology, American University of Beirut, 2007.



Since then, the Anesthesia Department has expanded to include 24 residents and 15 professors (Figure 4). The Department covers all areas of

surgery including open heart and major vascular surgery and transplantation (Fig 5). The hospital has increased in size to 420 beds. It is now considered the top medical center in Lebanon and a healthcare “safety net”—a major facility for the treatment of trauma patients irrespective of their religion or nationality—for the region. In many ways, the hospital offers the same quality of care and the same complete spectrum of anesthetic and surgical equipment that one would expect to find in the United States.

Fig. 5
Open Heart



But this is Beirut. There is no telling what will happen to the hospital in the near future. Lebanon is mired in a political and economic crisis, sparked by a massive suicide truck bomb that killed Prime Minister Rafik Hariri in 2005. Recent fighting between the army and Al Qaeda-inspired militants has sparked the worst internal violence in the country since 1990.

The ongoing political turmoil makes life more difficult, said Dr. Baraka. The hospital maintains full services and has not lost any staff, but it has a tough time convincing potential new faculty to move to Beirut.

Dr. Baraka says he will remain in Lebanon regardless of the heightened tension. He still works full time, starting his day at 7am. He spends the morning in seminars with faculty, residents and students. In the afternoon, he returns to the operating room (Figures 2,3). Lebanon, he points out, has no mandatory of retirement. He says he will “maybe” retire as emeritus professor when he turns 80.

Dr. Baraka is also editor-in-chief of the *Middle East Journal of Anesthesiology*, in addition to serving as a reviewer for a half-dozen other journals, chair of the Arab Board of Anesthesia and Intensive Care, and vice president of the World Federation of Anesthesiologists.

When asked what has motivated him during the past 25 years, Dr. Baraka said he is driven by a love of work. “Our main mission is [important] not only during peace, but is more important during the tragic situations”. He points out that 400 anesthesiologists have graduated in Lebanon since the start of the civil war.

In May of this year, the Middle East Medical Assembly-which Dr. Baraka helped to revive after the civil war-honored the professor for a lifetime of achievement. In his acceptance speech, Dr. Baraka offered the assembly some words of advice that helped him through some of his worst nights spent on the sofa. “Never do your job for money, prestige or position. Medicine has a humanitarian message; you do it with love”.

Christina Frangou