

After facing the sweltering record-breaking summer heat, in India, God has been kind with monsoon. Monsoon always brings back nostalgic smell of rain on earth, lush green trees and breathtaking views. Another feat that no Indian would forgo mentioning, was the long awaited T20 Cricket World Cup title, filling everyone's heart with sheer joy and pride. Keeping this in mind, we are delighted to present to you the second issue of fourth volume of our esteemed journal, with the purpose of educating and discussing safer practices and newer developments in the field of ophthalmic anaesthesia.

We are pleased to invite everyone for the upcoming AIOA conference on 20th–22nd September at Chandigarh, with the hope of an enthusiastic response to make this much awaited conference a success. The presence of both national and international experts of the field, at one place, dedicated to impart knowledge will enable the attendees to learn with a greater in-depth understanding of this specialization.

Ophthalmic anaesthesia training requires learning ophthalmic blocks like peribulbar blocks & sub-tenon's block apart from facial blocks. Most of these blocks are administered by landmark techniques. Peribulbar block is the most common block for ophthalmic procedures in India. Though orbital perforation with needle tip is a known complication, shearing of the globe with needle tip and its management is reported in this issue.

Ultrasound has been used extensively for interfacial, regional and nerve blocks. Ophthalmic ultrasound is different from normal ultrasound as ophthalmic mode is required to prevent any damage to the eye. In the current issue, we have a review article on ultrasound guided orbital blocks. Orbital blocks can also make a difference in postoperative pain relief after oculoplastic surgeries.

Another review article on "Anaesthesia for Open Globe Injuries revisited" discussed in detail about epidemiology, diagnostic modalities, controversies regarding choice of anaesthesia techniques and recent development for surgeries.

Premature infants are surviving due to better care in neonatal intensive care. There is an increased incidence of requirement of ophthalmic procedures, especially retinopathy of prematurity. Premature babies require special care due to underdeveloped organ function. This issue contains a case report on anaesthesia management of a premature infant; which will provide an insight to young anaesthesiologists for future reference.

As medical field is ever developing, so is the treatment of various systemic diseases. Cataract surgery is required in elderly age groups, who suffer from various comorbidities. The current issue highlights concerns and management of anaesthesia and monitoring of a patient with deep brain stimulator for cataract surgery.

Happy reading to all.



Dr Renu Sinha

Editor

Email ID: editorijoa@gmail.com

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