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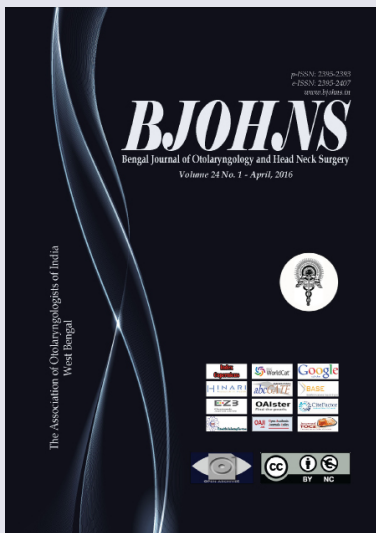
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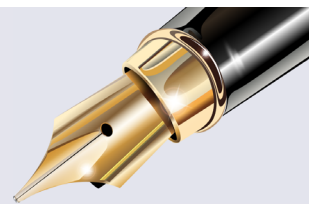
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From the Desk of the Editor



Live surgical demonstrations are very popular in our conferences. The live surgical sessions have traditionally been considered to be a very attractive and efficient dynamic educational platform to demonstrate and teach surgical techniques and explain the procedures to an audience of discerning peers where they can exchange their ideas. The real-time visual of the live surgical procedure exposes the audience to the challenges and intricacies of the surgery, second-best only to the proximity offered by being scrubbed and assisting the surgeon in the operating room. We learn how an accomplished expert avoids complications or how he deals with unexpected problems or challenges on the table. This may also be an ideal platform to demonstrate certain innovations in technique and introduction of technological advances, which has the advantage of interactive peer review.

Nobody doubts the benefits of surgical demonstrations for the medical profession. But, ethical appropriateness of live surgical workshops has recently been questioned. Opponents allege that live surgical broadcasts violate the autonomy of the patients. Financially disadvantaged patients are provided with inadequate information or even coerced into signing the consent for surgery. Surgery is not a procedure alone. Pre-operative work-up and post-operative follow-up are vital to the success of a surgery, as also choosing the right surgery for the patient. The visiting surgeon has to perform in an unfamiliar environment, using instruments he is unaccustomed to, while working with an unconditioned team. Movement of the audiovisual people and the presence of unsterile equipment increase the risk of infection. The distraction caused by continuous interaction with the audience increases the operating time and may also have other catastrophic consequences for the patient. The surgeon may be tempted to take some undue risk or perform some unnecessary manoeuvre to enthrall the audience to enhance his prestige, putting the interest of the patient at risk.

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Unedited video may be an alternative, which can overcome the ethical dilemma. In video demonstrations, the audience can request for a pause and can review a certain step time and again. But there will be no real-time interaction with the surgeon; there will be no opportunity to ask for a closer view or a different camera angle; and the general opinion is that, they tend to be boring to watch. Advances in audiovisual technology and high-speed telecommunications system have provided us with the opportunity of live telecast of surgeries from the comfort of the surgeon's own operating room. But the surgeon cannot actually participate in the conference, in person.

There still is no consensus about the best option till now. Some of the associations are against the live surgical workshops, some others have set up panels to debate the pros and cons of the practice and have allowed live surgical broadcasts with some riders. Live surgical sessions, for now, should take care of the ethical issues in right earnest and patient safety must get priority over all other considerations in such events



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