

ABSTRACT

Objective: To evaluate residents' perceptions of the quality of training and current teaching methods in the area of Regional Anaesthesia (RA) specifically brachial plexus blocks in the Doctor of Medicine (DM) programme of Anaesthesia and Intensive Care in Barbados, Jamaica and Trinidad. Also to ascertain their proficiency in doing these blocks and limitations encountered when attempting to perform these blocks.

Method: Multi centred, cross sectional study using a self-administered questionnaire as the data collection instrument.

Usefulness and significance of study: A regional technique is more cost efficient than General Anaesthesia (GA) for health institutions and can provide superior anaesthesia for certain patients and surgical procedures, as such residents need to be proficient in performing these nerve blocks.

Brachial plexus blocks have been found suitable for a wide cross section of surgical patients and procedures and have proven to be of superior benefit in particular demographics, especially elderly patients, who are at risk of post operative cognitive dysfunction. It reduces blood loss thereby limiting the need for reoperation and lowers the risk of mortality and post operative morbidity. Patient satisfaction is linked to minimal attempts and minimal complications.

Known complications can be fatal. Improvement and increased availability of new technology afford anaesthetic personnel the opportunity to perfect this "art". Development of chronic pain or cancer recurrence can be reduced with regional anaesthesia. (1)

Places of Research: University Hospital of the West Indies, Kingston Public

Hospital, Bustamante Hospital for Children; Kingston, Jamaica, Queen Elizabeth Hospital, Barbados, Eric Williams Medical Sciences Complex and Port of Spain General Hospital, Trinidad.

Results: Residents have a positive attitude towards the contact teaching technique used for teaching brachial plexus block. Instruction done by the consultant was the preferred choice of instruction by most residents. There is a statistically significant relationship between teaching technique and knowledge, $p < 0.05$.

Conclusion: There needs to be more structured teaching sessions to impart knowledge of regional techniques, as many prefer a one-on-one method of instruction. Regional techniques are being increasingly used across the Caribbean because of the perceived benefits of these techniques.

Key words: Regional anaesthesia, brachial plexus block, peripheral nerve block, Ultrasound Guided Regional Anaesthesia (UGRA), General Anaesthesia (GA).