

Editors' Speak

The airway, as we are aware is 'shared domain' by the ENT surgeon as well as the anesthesiologist making procedures on this anatomical part very precarious. Basic knowledge concerning the airway anatomy and physiology is essential for the surgeon, in addition to the understanding that special procedures need special concerns and skills.

The airway begins from the anterior nares, and ends at the level of the alveoli. An effort has thus been made to encompass the same.

Inflammatory pathologies and foreign bodies form a majority of routine ENT practice, and thus warrant mention wherever the discussion focuses on the airway.

Today, laryngopharyngeal reflux does indeed play a role, not only in airway disease but, also in determining outcomes of surgery on the airway and hence, is an important part in the preoperative evaluation and preparation of the patient.

Various readers have shared their experiences in the case reports, making this issue an interesting read.

This issue on the airway is a first of a series which includes a variety of articles which will fuel the interest of the reader into looking forward to the other issues in this series, since every aspect of the importance of the airway and precautions to be taken cannot be covered in a single issue.

Just as we have seen rapid advances in instrumentation and expertise in surgeries of the airway, there has also been a great advance in anesthesia techniques.

The forthcoming issues on this topic shall delve deeper into discussing various pathologies.



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