Why Is Karolinska on the Cover of an American Journal?

NE of the joys of academic life is the open exchange of ideas, oftentimes in person as part of visiting professorships among universities. This thought struck me as I was sitting in Lars Eriksson's office at the Karolinska Institutet and Hospital in November 2009 as a visitor and lecturer in honor of their previous chairman, Olof Norlander, M.D., Ph.D. (1922-1988). Despite my jetlag and the murkiness of a rainy, November day in Stockholm, the moment was bright with descriptions of faculty past and present from this Institution who have contributed to our fundamental understanding and daily practice of anesthesiology. I mused that it might be nice to share and highlight this somehow in Anesthesiology. The current issue is the result of those musings. Professor Eriksson and I agreed on a deadline for the submission of manuscripts in the early summer of 2010, and we were both pleased to receive more than 20 manuscripts, including original research, a case scenario, a striking image of anesthesiologists not wearing masks in the operating room, and editorials. These underwent our standard, rigorous peer-review process, and the accepted papers make up a significant portion of the current issue.

Why center an issue of the Journal around a single institution? There were three goals: to provide a short history of an influential department in the development of our specialty; to highlight how leadership has shaped and maintained a culture of active scientific investigation, even in these difficult economic times; and to attract high-quality manuscript submissions that meet the mission of the Journal to advance our specialty by promoting novel discovery. I believe these goals have been met in this instance and could similarly be met by future issues highlighting the two dozen or so departments that have contributed and continue to contribute to our fundamental understanding and development of clinical practice. In addition to the original science itself, we have much to learn from each other on differing approaches that have successfully created and sustained an environment of academic curiosity and investigation.

So, why the Karolinska on the cover of an American journal? ANESTHESIOLOGY, the journal of the American Society of Anesthesiologists, is an international journal, with a majority of submissions and publications from outside the United

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States. As I previously noted, our Editorial Boards represent Europe, Asia, and Australia in proportions that approximate manuscript submissions from those areas. Americans played a large part in the birth and development of our medical specialty, but so have individuals and institutions around the world. As briefly discussed by Professor Eriksson in his editorial,² the Karolinska has contributed importantly to both academic and practical development of our specialty. This Institution also chooses individuals for Nobel Prizes, including the prize for Medicine or Physiology, whose committee was chaired for several years by Sten Lindahl, M.D., Ph.D., F.R.C.A., a previous chairman of the Department of Anesthesiology. That such a prestigious position was held by an anesthesiologist underscores the leadership that individuals in this department have demonstrated within the local and global family of medicine. This is also clearly reflected in the fundamental physiology and clinical trials from anesthesiologists at the Karolinska presented in the current issue in each of the three branches of medicine—perioperative, critical care, and pain—that comprise our specialty.

Finally, it was with great sadness that I learned in June of the death of Torsten Gordh, Sr., M.D., Ph.D. (1907–2010), a former chairman of the Department of Anesthesiology at the Karolinska. The Journal does not publish obituaries, but in this case, we were just finalizing a Classic Papers Revisited article regarding Dr. Gordh's introduction of lidocaine into clinical practice in the 1940s, and we include this as well as some comments regarding Professor Gordh in the current issue. Lidocaine revolutionized the application of local anesthesia in our specialty and globally throughout medicine, and we are very pleased to honor Dr. Gordh's achievements with this article. He was present at my lecture in Stockholm last year, and I marveled at the strength of his intellect at the age of 102. I believe he would be proud, as are we, at ANESTHE-SIOLOGY in highlighting his department to the world.

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