WHAT ABOUT US?

WE MUST BE PREPARED TO BECOME A SECOND VICTIM.

Y. Lorenzo, B. de la Quintana, R. Rojas, L. Lombardo.

Hospital Universitario Santa Cristina, Anestesiología, Reanimación y Tratamiento del Dolor, Madrid, Spain.

We need to acquire the skills to confront the aftermath of an adverse event.

Background and Aims:

Adverse events (AEs) are an inherent component of our practice. They cause harm to patients (first victims) and disturbance to the professionals involved in them (**second victims**).

We have developed a safety culture trying to minimize AEs, but many of us are still unprepared for the *emotional responses* that these events can evoke.

Methods:

We report a case of a 56-yr-old man who developed *Streptococcus salivarius* meningitis within 16 h after an uncomplicated knee arthroscopy performed during spinal anesthesia.

Results:

His evolution was very good. After 48 hours of intravenous antibiotic treatment, there weren't any symptoms. He left hospital one week later without any kind of sequels. His anesthesiologist, on the other hand, had to confront an internal investigation for weeks, finding tough to come back to the operation room for some days. She described sleeping difficulties, anger, remorse, intrusive memories, anxiety and tachycardia when performing the same technique. The support of her peers was key for her recovery.

*Who loses wealth loses much;
Who loses a friend loses more;
But the one who loses his courage loses all.
- Miguel de Cervantes.*

Conclusions:

- In Spain, we can extrapolate that 1.5% of the health workers will be involved in an AE per year. Although we don't have enough data, anesthesiologists are possibly at higher risk.
- 2% of professionals involved in an AE leave the profession.
- As anesthesiologists, we are prepared to avoid an AE, but few Hospitals and even less Anesthesiology's departments have developed organizational support programs for the second victims.
- We need to design protocols and guidelines for assistance to the professional involved in an adverse event.