

**REMARKS BY THE HONOURABLE PETER UNDERWOOD AC,
GOVERNOR OF TASMANIA,
TO OPEN THE AUSTRALIAN SOCIETY OF ANAESTHETISTS
71ST NATIONAL SCIENTIFIC CONGRESS, SATURDAY 29TH
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It is a great pleasure for me to welcome you all to Tasmania and Hobart in particular for this, the 71st National Scientific Congress of the Australian Society of Anaesthetists. According to Government House records it is 15 years since this congress has been held in Hobart which, I must say, is far too long.

The theme of your meeting is “Pushing Boundaries” with, so am I informed, the objective of challenging you all to push the boundaries to become better anaesthetists. You have a huge programme to get through over today and the next three days with many parallel sessions and workshops dealing with a rather eclectic mix of subject matter. For example between 11:15am and 1:15pm today there are about 24 separate sessions on offer ranging from “Africa - did it change my life?” to “Regional analgesia for abdominal surgery - rectus sheaf blocks” and “Practical approaches to Head Injured patients.”

I generally like to speak about some technical aspect of the relevant discipline at the conferences I am asked to open. Initially I toyed with giving you the benefit of my views on “Principles of catheter insertion using ultra sound guidance” or perhaps “How to make an epidural work faster and better”, but I have to confess that I

have no idea what any of those things involve. As my background is the law I thought as an alternative you would like to hear my 3-hour dissertation on the importance of the rule of law and the historical development of an independent judiciary. However, my wife thought this might not be such a good idea after all, although I can't understand why she thought that.

As a last resort I thought perhaps I should consult a friend of mine who is a surgeon to see what he thought might be of interest to a meeting of anaesthetists, but his only suggestion was to talk about hot air ballooning. I know you may think that is a bit strange but the fact of the matter is that he is not only a surgeon but also a mad keen fanatic when it comes to hot air ballooning. It was he who told me about the fine still morning when he set off in his balloon from the outskirts of Canberra but lost his bearings when the cloud closed in. He suddenly spotted a man walking through a paddock so he lowered his balloon and called out, "Excuse me, can you tell me where I am?"

The man below looked up and said, "Yes, you're in a hot air balloon, hovering 30 feet above this paddock."

"You must be an anaesthetist," said my friend, the surgeon.

"I am," replied the man. "How did you know?"

"Well," my friend said, "everything you have told me is technically correct, but it's of no use to anyone."

The anaesthetist promptly replied saying, "Then you must be a surgeon."

"How did you know that?" my friend replied.

"Well," said the anaesthetist, "you don't know where you are, or where you're going, but you expect me to be able to help. You're in the same position you were in before we met, but now it's my fault."

But I must say that the Q & A session with Tony Jones on Tuesday morning looks most interesting, "The cost of Healthcare - Pushing the Boundaries too far?" As you are well aware of course the cost of health care is something that affects all of us. Mind you, the expression "Health Care" is extremely wide and includes a vast range of drug therapy, surgical and non-surgical interventions, physiotherapy, psychiatry, and probably prophylactic health care as well. In addition, the issue of cost is multifaceted as well. There is the cost of research; the cost of developing equipment - sometimes very expensive; there is the cost associated with training in the new areas and there is the cost to the public purse and to the patient. Mr Jones will have to be a strict disciplinarian or the time for the session will expire before the issues have been confined.

Probably the session will raise the point that it's not just a matter of the dollars themselves, but how do we use the dollars effectively, making the real issue on the cost of health care an issue of making choices to get the maximum value from the health expenditure? But even if there is agreement about that, it really raises the issue of how is the maximum value to be determined or measured? "Important parameters that should be considered under

this head include the incidence and prevalence of the disease, the cost and success of treatment, the cost and success of diagnosis, and the cost and success of preventive treatment. It has been said that, “One fundamental issue of health care economics is the study of cost versus benefit analysis. It is often difficult to place a dollar value on a person's life, as is commonly done in the courtroom.”¹ Then no doubt, there are those who will argue that the proper goal for any health care delivery system is to improve the value delivered to patients and that value in health care should be measured in terms of the patient outcomes achieved per dollar expended. Or should the issue be the number of different services provided or the volume of services delivered or should it be the value of those services to the patient. As no doubt most would agree, more care and more expensive care is not necessarily better care.²

And it occurs to me that there are some who may say that fear of legal proceedings are contributing to the rising costs of health care because it leads to the practice of defensive treatment. On top of all that there is a widespread view that increased longevity is the basic cause of rising healthcare costs.

As I was writing these opening remarks – sometime ago now – I thought that the “Cost of Healthcare – Pushing the Boundaries Too Far” is a huge question to debate and that I would love to be there to

¹ “The impact of medical technology on healthcare today” by LTH Tan and KL Ong, Hong Kong Journal of Emergency Medicine; <http://www.hkcem.com/html/publications/Journal/2002-4/231-236.pdf> accessed 30th July 2012.

² <http://hbr.org/2011/09/how-to-solve-the-cost-crisis-in-health-care/ar/1>. Accessed 30th July 2012

listen to the discussion, for the issues are in the hands of a very distinguished panel of debaters and a very skilled Chairman. Now, I'm pleased to say that when the organisers of your conference found out that I would like to be there they kindly invited me to come along so I'll stop talking about it now and do what I am supposed to and that is open this Scientific Congress. I hope you all find it exciting, stimulating and learned. I also hope that you will all enjoy your stay in Tasmania and I will be back on Tuesday morning for the great debate.