Authors' Reply: Enhanced Recovery After Surgery for Low and Middle-Income Countries

Kelly McQueen¹ · Ravi Oodit² · Miliard Derbew³ · Paulin Banguti⁴ · Olle Ljungqvist⁵

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Dear Dr. Felipe Quezada,

Thank you for your important comments on our article Enhanced Recovery After Surgery for Low and Middle-Income Countries (LMICs) [1]. We value your perspectives on the implementation and challenges of ERAS in countries such as Chile, and we look forward to proposing specific recommendations for both in the near future.

We recognize that there are significant differences in available resources for health between countries with the World Bank economic designation of upper-middle, lower-middle and lower income [2]. Chile is currently categorized as an upper-middle income country, and as such has infrastructure and resources that allow for ERAS protocols and processes, but as you point there will be challenges and demands that are specific to Chile and therefore may require adjustment of the current ERAS guidelines and protocols.

Our evaluation of and planning for ERAS in LMICs is in the earliest stages, and we will be considering the processes and protocols for each economic level, very likely with specific consideration for each hospital level in the lower-middle and low income countries.

Crafting ERAS processes and protocols to be successful in reducing complications and improving outcomes across

the spectrum of resource levels between and within countries will be complicated. Implementing ERAS protocols will require collaboration not only within countries, but throughout regions and with the support of local and regional colleges of surgeons and societies of anesthesiologists. We believe that this sustained effort will be especially valuable as the scale up to the goals of the Lancet Commission on Global Surgery progress toward 2030 [3].

We look forward to collaborating with many experts across the globe, including you and your colleagues, as ERAS is planned for and implemented in LMICs.

Sincerely,
Kelly McQueen
Ravi Oodit
Miliard Derbew
Paulin Banguti
Olle Ljungqvist

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✉ Kelly McQueen
kelly.mcqueen@vanderbilt.edu

¹ Department of Anesthesiology, Vanderbilt University, Nashville, South Africa

² University of Cape Town, Cape Town, South Africa

³ Black Lion Hospital, Addis Ababa, Ethiopia

⁴ Department of Anesthesiology, College of Medicine and Health Sciences, University of Rwanda, Kigali, Rwanda

⁵ Örebro Universitet, Örebro, Sweden