

Professor Salard Tupavong, Key Contributor to the Development of Anesthesia in Thailand†

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Abstract

The practice of Anesthesiology by a qualified Thai national was introduced to the Kingdom of Thailand 50 years ago, when Professor Salard Tupavong graduated from the United States of America and returned to Siriraj Hospital. She made a tremendous contribution to the birth of anesthesia as a specialty, as a pioneer of modern anesthesia and pain therapy in Thailand. She initiated a Residency Training Program and an Inter-hospital Lecture Program in Thai Anesthesiology. She has also helped promote the academic advance of the specialty as well as served as a source of communication and distribution of knowledge for Thai and Asian anesthesiologists. She was regularly invited as an honorary speaker by the committees of both national and international congresses. We are most appreciative of everything that she has done and wish her happy and healthy days ahead.

Key word : Key Contributor, Salard Tupavong, Anesthesia in Thailand

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The idea of anesthetizing people has been close to the heart of every Asian for a very long time as it is reflected in the very famous Indian epic poem, Ramayana. Written some 2000 years ago, this epic tale is about the war between gods and demons. Along the corridor in the Emerald Buddha Temple, Bangkok, there are mural paintings of the Ramakien (written in 1807), the Thai version of this famous Indian Epic Tale. One of the paintings is shown in Fig. 1(1). Hanuman, the monkey knight of Prince Rama, was trying to protect the whole army in the forest during the night by keeping them in his mouth. The demon (Maiyrap) administered an inhaled substance (plus black magic) to anesthetize the whole monkey army of Prince Rama in order to kidnap him. The whole army recovered perfectly well in the morning after that, so the demon must have used a very good anesthetic. This demonstrates how far back in time Asian people had imagination about how to anesthetize someone (the medicine or magic that could be used to put someone off to sleep and to wake up normally afterwards). On the contrary, anesthetic service was not required in traditional Thai Medicine as surgical treatment was not a therapeutic option because it was believed that surgery in any major parts of the body would lead to death.

The practice of modern medicine started to come into the Kingdom of Siam with the missionary activity. People would acquire this type of medicine as the last resort when traditional medicine had failed to cure the illnesses. Surgery also came into Thailand with the arrival of Missionaries and Modern Medi-

cine. On January 13, 1837, Rev. Dr DB Bradley, performed the first major operation in Thailand which was the amputation of an arm of a Buddhist monk after an explosion of an arsenal. This surgery was done immediately in the field without any kind of anesthesia or even analgesia. The patient survived for many years after the surgery. That was very surprising to Thai people at that time.

Anesthesia arrived in this country later than that. In March 1847, only about 5 months after the first anesthetic in the world was given in Boston, probably the first one in Asia-surely in Thailand was administered. Dr Samuel Reynolds House gave ether for the removal of an 8-inch piece of bamboo from the leg of an 84-year-old lady patient. In the initial period of surgery and anesthesia in Thailand, most cases were in the hands of the missionaries.

In 1888, Siriraj Hospital, the first public hospital was founded in the country(2,3) and a few years later; the first medical school was established here. At the beginning, both modern and traditional Thai medicine were practiced and taught in the same place. Thai physicians became involved in the development of anesthesia in Thailand after this first Medical School was founded in 1890. For nearly the first 50 years, anesthesia was given by the surgeons as they took turn to give anesthesia and performed the operation. Chloroform and ether were the anesthetic drugs of choice during that period(4).

The era of modern anesthesia era started when there was a full-time anesthesiologist. This happened because the surgeon started to realize how

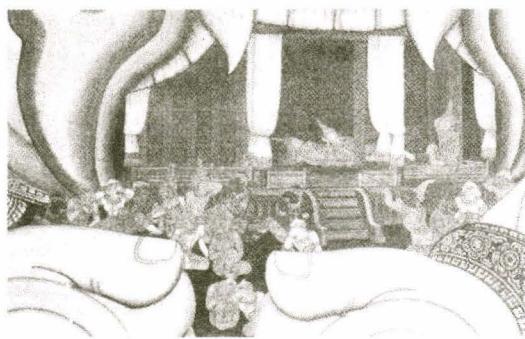


Fig. 1. Mural Painting of Hanuman and Maiyrap in the famous epic tale "Ramayana" on the wall of the Emerald Bhudha temple.

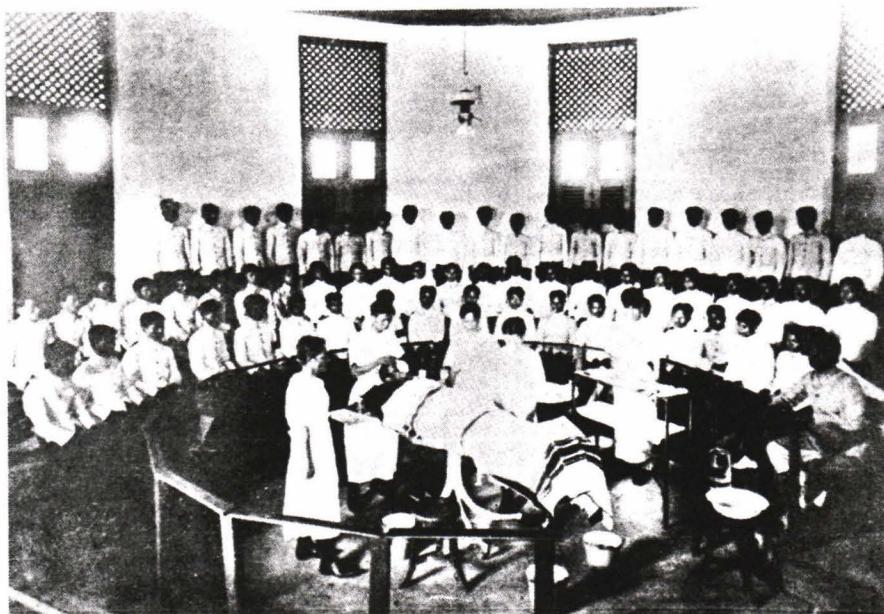


Fig. 2. The use of the open drop ether technique in the operating theater at Siriraj Hospital about 70 years ago.

important anesthesia was for the safety of the patient and the progress of surgery. The Professor of Surgery during that time persuaded one of his surgical instructors to leave her specialty to be trained in Anesthesia. Dr Salard Chunhawat, later to become Prof Salard Tapavong, was the one who took up the challenge⁽⁴⁾.

Born in 1922, Professor Salard Tupavong qualified from Siriraj Hospital in 1945 and after that she trained as a surgeon. In 1949, the Head of Surgery Department persuaded her to go abroad for further study in the USA with the idea that the field she was going to study would be anesthesia and surgery. She was sponsored by the American Association of University Women and later was co-supported by HM the King's Father scholarship. After arriving in the United States, she found that these 2 specialties were separate. She decided to get her training in anesthesia and later became the first fully trained Thai anesthesiologist.

After coming back to Thailand in 1952, she contributed tremendously to the development of anesthesia in Thailand. Her contribution can be summarized as follows: a pioneer and a leader of modern anesthesia, the great and beloved teacher-improving teaching and training of anesthesia in Thailand, co-

founder of the Association of Anaesthesiologists of Thailand in 1971 (now the Royal College of Anaesthesiologists of Thailand) and an initiator of the Thai Journal of Anesthesiology (since 1974).

In 1952, she came back to her country and has served the country not only as an individual anesthesiologist but also as the pioneer and the leader in the specialty. She was the first lady Head of Department in the Medical School. Life as a pioneer was not very easy. When she started, she had to work with only a limited amount of resources, e.g., she had only 1 old anesthetic machine (Fig. 3) for all 4 operating theaters. This later required management skills in acquiring anesthetic machines and equipment for each theater. In addition, during that period of time if an anesthesiologist wished to use a cuffed tracheal tube, she had to make one herself. She applied local material, such as penrose drain, a bicycle inner tube, needle, plain tracheal tube, and glue, to make a cuffed tracheal tube.

More complex and sophisticated operations became possible after a full time anesthesiologist existed. In 1954, the first cardiac anesthesia (for mitral valvulotomy) was done at Siriraj Hospital and later in 1959, the first open cardiac anesthesia and surgery were done in Thailand (for a closure of atrial septal

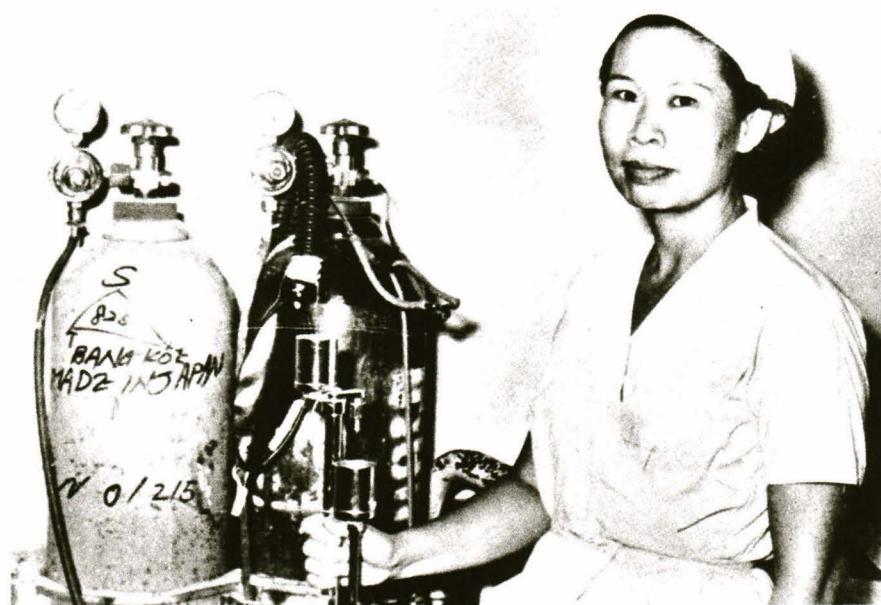


Fig. 3. Professor Salard Tupavong and one of the first anesthetic machine at Siriraj Hospital.

defect). In 1960, she decided to go to Canada for further study and more experience in cardiac anesthesia.

She led the Division of Anesthesiology at Siriraj Hospital, which later became the Department of Anesthesiology in 1965, for 30 years. In 1985, she became the first Professor in Anesthesia in Thailand. During her time as a leader in the specialty, she established and expanded the role of anesthesiologists into critical care services and pain therapy. She established a Pain Clinic at Siriraj Hospital in 1973 and used acupuncture therapy to treat a wide variety of diseases and to provide anesthesia for various surgical procedures.

The Division/Department of Anesthesiology, Siriraj Medical School was the first nidus of academic activity in Thai anesthesiology that made advances in surgery possible. She also provided training for all levels of anesthetic personnel for Thailand. At the beginning, she drew in many teachers by in house training and later by promoting training abroad in USA, UK, Canada, and Denmark. When the Thai Medical Council started to accredit 28 specialty training programs in 1972, anesthesia was one of them. She was also the initiator of the Inter-hospital Lecture Program for residents in Anesthesiology of

the medical schools in Bangkok. She believed that training only MD anesthesiologists would not be enough to provide the anesthetic service for the whole country and training nurse anesthetists would be required to serve that need. In 1970, she established the training of nurse anesthetists so that we can have enough manpower in rural areas. She led the department towards globalization by sending the junior staff to study abroad in many developed countries, and even getting herself trained more in acupuncture in China as well as promoting participation in many international meetings.

As a key leader in the field of anesthesia in Thailand, she was one of those who founded of the Association of Anaesthesiologists of Thailand in 1971 (later became the Royal College of Anaesthesiologists of Thailand) and became the second president of this association. This association served not only as the center for collaboration in all academic of activities of Thai anesthesiologists from various institutes in Thailand, but also as a representative of the country in the international stage.

Evidence of academic excellence of any specialty is the publication of a Journal. In this aspect, she played an important role in promoting circulars in anesthesia in Thailand and this activity evolved

to be the Thai Journal of Anesthesiology (published since 1974). This has served as a source of communication and distribution of knowledge for Thai anesthesiologists. Therefore she has also helped promote the academic advance of the specialty and the number of members of this specialty in Thailand.

Personally, surgeons who have worked with Professor Salard have commented that she gave them moral support in critical situations. Her style was straightforward but always supportive. She attended and was chairwoman of many international events and always charmed people with her strength and smiles. She has been a role model for many anesthesiologists in our country.

It is very difficult to choose only one person who has contributed to the advance of anesthesia in Thailand as required by the organizer of the 12th World Congress of Anaesthesiologists. In fact, before I went to Montreal for the Congress, I asked Professor Salard what she considered to be her "red ribbon" contribution to the progress of anesthesia in Thailand.

land. She answered me that the progress of anesthesia has been accumulated over time by the contributions of many people, not by any single person. I wholeheartedly agree with her that history was not written by a single person and many more names should be mentioned. However, I am very certain Professor Salard Tupavong's contributions to anesthesia in Thailand are well recognized and worth recording in the Thai history of anesthesia. After retirement, Professor Salard spent her time in a private pain clinic, touring Thailand and abroad. She was invited to participate in many national and international congresses regularly. We are very proud of her and we all wish her a great happiness and healthy years to come.

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ศาสตราจารย์แพทย์หญิง คุณหญิงสลาด ทัพวงศ์: ผู้ว้างรากฐานวิสัญญีวิทยาในประเทศไทย†

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การปฏิบัติงานด้านวิสัญญีวิทยาซึ่งมีคุณภาพยอมรับระดับชาติของไทย เริ่มตั้งแต่ 50 ปีแล้ว เมื่ออาจารย์สลาด ทัพวงศ์ นำการฝึกอบรมวิสัญญีวิทยาจากสหรัฐอเมริกาแล้วกลับมาทำงานที่โรงพยาบาลศิริราช อาจารย์เป็นผู้บุกเบิกผู้นำทาง วิสัญญีวิทยาของเมืองไทย แยกงานวิสัญญีออกจากแผนกวิชาศัลยศาสตร์ นำวิสัญญีวิทยาและการรังับปอดสู่ชีวิตใหม่กันสมัย และก้าวหน้ามานานถึงทุกวันนี้ อาจารย์ได้รับความนิยมและเชื่อถือในประเทศไทย ให้เป็นผู้นำทางวิสัญญีวิทยา ให้เป็นผู้นำทางวิสัญญีวิทยาในประเทศไทย รวมทั้งโปรแกรมการสอนบรรยายวิชาวิสัญญีวิทยาแก่แพทย์ประจำบ้านวิสัญญีระหัวง โรงพยาบาลที่มีการฝึกอบรมแพทย์ประจำบ้านในกรุงเทพฯ และจากนี้อาจารย์ก็ส่งเสริมด้านวิชาการทั้งในประเทศไทยและต่างประเทศ เป็นผู้เชื่อมประสานความรู้ทั้งทางวิชาการและสังคมของวิสัญญีระดับประเทศทั่วโลก อาจารย์ได้รับเชิญเป็น วิทยากรทั้งระดับชาติและนานาชาติเสมอ พวกเรารู้ว่าวิสัญญีชีวะเป็นเครื่องมือที่สำคัญค่าและรู้สึกว่าเป็นเครื่องมือที่ดีที่สุด คือการรักษา คือการรักษาชีวิต ขอให้อาจารย์อันเป็นที่รักของพวกเราประเสริฐความสุขกายสุขใจและมีสุขภาพแข็งแรงตลอดไป

คำสำคัญ : ผู้บุกเบิก, สลาด ทัพวงศ์, วิสัญญีในประเทศไทย

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