

SURGERY AS AN ESSENTIAL AND COST-EFFECTIVE INTERVENTION

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With the decline in the burden of communicable diseases in the world, one-third of the total disease burden is now due to surgical disease, with the majority being injury and cancers. In 2015, responding to this epidemiological transition, the World Health Organization (WHO) declared surgery to be a part of public health at the World Health Assembly, a meeting of all health ministers. Previously, surgical and anaesthesia care were perceived as too expensive and too complex to be a public health priority in resource-poor settings. The fact that early surgery saves lives and boosts the economy encouraged health planners to put surgery in the essential group of services in any national health strategy. Since then, scaling up surgical and anaesthesia care became a new worldwide movement under the umbrella term of 'global surgery'. The Disease Control Priorities group of the World Bank has clearly identified surgical procedures that address the substantial needs of populations. In the absence of investments in surgical care, case-fatality rates and lifetime costs to the individual and society are high for common and easily treatable conditions, including appendicitis, hernia, fractures, obstructed labour, congenital anomalies and breast and cervical cancer. Furthermore, the cost-effectiveness of surgery for cataracts, hydrocephalus, limb deformity, general surgery and cleft lip or palate repair is comparable to widely used public health strategies, such as the bacille Calmette-Guérin (BCG) vaccine, and is much greater than other standard public health measures, such as antiretroviral therapy. Surgery becomes more cost-effective when not delivered as isolated interventions, but rather as a group of interventions within a platform of clinical care, such as a district hospital.

How essential surgery can be delivered through surgical • healthcare delivery platforms To appreciate: The importance of access to surgical care • The global surgical workforce • The importance of global surgical metrics and research •

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