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GUSTAVO PEREIRA FRAGA, TCBC-SP¹; José Eduardo Ferreira Manso, TCBC-RJ²; Sizenando Vieira Starling, TCBC-MG³

The current issue of the Journal of the Brazilian College of Surgeons has everything to go down in the history of the largest organization of surgeons in Latin America. The Brazilian College of Surgeons (CBC) was founded in 1929, and this journal, published every two months continuously for more than 80 years since 1974, is its most widely-read publication of surgery science among its members and other readers. The reference to it in the SciELO database in 2004, and in Medline/Pubmed in 2009, is a recognition of the excellence of this journal and of the need for its internationalization. Recently the Coordination of Perfection of Higher Education Personnel (CAPES) promoted the journal to the Qualis B1 level so that researchers and surgeons from Brazil could divulge their reports in this magazine, in order to enhance and qualify national scientific research.

Parallel to this important mission of the CBC, a young society, SBAIT (*Brazilian Society of Integrated Care to the Traumatized*), established in 1982 by Prof. Dario Birolini and his colleagues at the University of São Paulo, have been working to promote a still-neglected malady by Brazilian society: trauma. The need to address this malady is ever-increasing such that the partnership between CBC and SBAIT has become more intense.

Trauma is a malady that has social, economic and cultural characteristics. The fact that murders constitute the main cause of death from external causes reflects the inequalities that affect our country. Traffic deaths are often a consequence of a lack of education, planning and neglect. What is our role, as health professionals and surgeons, in this gloomy and sometimes daunting scenario?

The world today is going through many changes, and one that makes us proud is the fact that Brazil is a country of emerging economic growth, already being one of the great nations. But many of us surgeons work in shifts in emergency units which are overcrowded, with shortages of beds and often a basic infrastructure and few resources. Often we are not proud of our National Health System. We feel rather that there is a need for improvement and change. We need more funding for health, and this includes assistance to trauma patients, and appreciation of our professionals. This is true specifically for those working in emergency care, where the exodus of experienced and competent professionals is evident. The federal government policies in recent years, be they for pre-hospital treatment, regulation, emergency units and now the expectation of

the creation of the Trauma Network, renew the hopes of Brazilian trauma and emergency surgeons. Remember that in recent months, representatives of CBC and SBAIT have met regularly with other medical societies in the Ministry of Health in Brasilia to plan this initiative. We are hungry for change.

However we are aware that this alone won't resolve our problems and we must do our homework. The teaching of trauma and emergency care in many medical schools and other health professions is often inadequate. The creation of disciplines devoted to trauma date back to 1987, at USP and Unicamp, but there are still few institutions that have an academic framework focused on this area. The movement of the Leagues of Trauma in Brazil, since 1992, having had as one of its leaders the late Prof. Mario Mantovani, is constantly growing and is a reflection that academics are eager to learn. The leagues are already being implemented in other countries such as Venezuela, Paraguay and Colombia, and the fact that CBC is going to admit academics among its members shows this concern about the future. Together, CBC and SBAIT can multiply these actions and attract more and more doctors to the area of surgery.

Something that also concerns us is the training of these surgeons. Brazil probably doesn't need more doctors (16,000 graduate annually), but more good doctors. And we know that residency is the greatest moment in the formation of the surgeon and two years' training is certainly insufficient. We know the market with its various surgical specialties discourages the young general surgery professional, and the government, through the Ministries of Education and Health, is attentive to the need of the country for more trained professionals. The recent Pro-Residency program, that prioritizes among others things, the training of surgeons in the area of trauma surgery, is a sign of this need, and the creation of several such programs within different institutions around the country reveals the repressed demand. It is worth noting that the training ground is not only the university hospitals, but it is important to place these residents in teaching hospitals and in the national health service, where the vast majority of trauma patients are found.

It is as a result of this integration that this issue of the journal has appeared. Since 2009 SBAIT has been planning its *Tenth Congress* in conjunction with the *Fourteenth Brazilian Congress of Trauma Leagues* and the pioneering initiative of organizing the *World Trauma*

^{1.} University of Campinas (Unicamp); 2. Federal University of Rio de Janeiro (UFRJ); 3. Hospital João XXIII, Belo Horizonte, MG.

Congress (WTC). A host country of World Cup Soccer and Olympic Games, and thus under global attention, Brazil needs to organize its health system, paying much attention to the area of trauma, which is lacking. With the support of CBC, important international societies, various national societies and the federal government, the state and city of Rio de Janeiro, what we believe to be a magnificent event has emerged. To cement this partnership, CBC has devoted this issue of the magazine to the WTC, in order to increase the scientific material on trauma, with a focus on Brazil, and to present this important journal to approximately 400 foreigners attending the event in Rio. There will be 72 foreign speakers, coming from 36 countries, who will join other delegates from abroad and about 2,500 from Brazil, with a large participation from academics. The world of trauma is needy and it will be understood that, despite some limitations, good medicine is also practiced in our country. In addition, our league members will be introduced to the delegates and the potential of this country, as not only in natural resources and soccer, will be realized.

Readers will be treated to two review articles from devoted teachers on controversial issues such as

damage control surgery and diverticulitis. They will be introduced to more aspects of trauma epidemiology in different regions, diagnostic methods and the surgeon's dilemma: knowing when not to operate, based on procedures, which would result in fewer complications for the patient, when they are well selected for non-operative treatment. They will observe that the approach to traumatized patients is multidisciplinary, from the most basic to the most complex, and that in education we are also advancing, both at the undergraduate and graduate levels. And they will understand that we have to discuss the quality of care, the organization of records and the processes to improve care. Brazil needs well trained surgeons, be they general, trauma, emergency or other specialists who are engaged in all those aspects of trauma which need to be addressed.

And our role? We need to change this scenario. With the experience of the eldest, the strength of the young and the wisdom of those who can release themselves from their own vanity, reach out and help those most in need: trauma victims. We are physicians and surgeons and we believe that what is added, multiplies.