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Editorial

WALANT: Past, Present and the Future



In the last decade, WALANT (Wide-awake Local Anaesthesia No Tourniquet) surgery has been widely utilized globally with an exponential increase in publications.^{1,2} Yet, the myth of adrenaline causing finger ischaemia is still strong and prevalent despite numerous publications. It is only in hand and microsurgery and perhaps in orthopaedic and plastic surgery where WALANT predominates otherwise in other areas of medicine, the taboo is still strong.

Although some do not define it as a surgical technique per se, but as a method of anaesthesia, we would argue otherwise. It certainly allows the surgeon to see flexor tendons gliding in pulleys, possible malrotation after reduction of finger fractures, contraction of muscles and a variety of other movements. As a method of anaesthesia, it provides longer pain relief and allows flexibility and independence to the surgeon to choose their own time of surgery utilizing time efficiently.

Perhaps more importantly, it allows the surgeon to have a better relationship with their patients besides being able to emphasize early motion and rehabilitation protocols during the surgery itself. Frequently patients have many questions, but the time with their surgeon is limited thus WALANT surgery provides them more time.

Not all surgeries are amenable for WALANT and the surgeon should be pragmatic in patient selection. There are both patient factors (such as a hyperanxious patient, language barriers, peripheral vascular disease (eg Buerger's, Raynaud's diseases)) and surgeon factors (such as surgeon's confidence, long duration of surgery,

unfamiliar instruments or surgical technique, old/comminuted fractures, humeral/femur fractures).

We are happy to present this WALANT special issue as a collection of original articles, systematic reviews, surgical techniques and case reports. Additionally, it presents articles from various parts of the world portraying how WALANT surgery is performed in those centers. As the world places a higher value on economical, eco-friendly and green methods of surgeries, WALANT surgery is truly the future.

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References

1. Niamh O' Neill, Ali Abdall-Razak, Emma Norton, Aneeta Kumar, Heer Shah, Harman Khatkar, Zaid Alsafi, Riaz Agha. Use of Wide-Awake Local Anaesthetic No Tourniquet (WALANT) in upper limb hand surgery: A systematic review protocol. *Int J of Surg Protocols*. 2020;20:8–12.
2. Joey Kurtzman, Jennifer Etcheson, Steven Koehler. Wide-awake local anaesthesia with no tourniquet: An Updated Review. *Plast Reconstr Surg Glob Open*. 2021;9(3):e3507.

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