

This edition of the Journal contains four disparate and varied articles commending local anaesthetic arthroscopy, 3D mesh repair for inguinal hernia repair, fistula-in-ano repair and ambulatory experience in Malaysia.

From the UK, Tyler et al describe their experience of 140 consecutive intra-articular local anaesthetic adult knee arthroscopies, and conclude that the technique is highly reliable, safe and cost-effective and well tolerated by their patients.

From Seville we have an audit of 1840 patients undergoing inguinal hernia repair over an 8 year period using 3D PHS mesh under local anaesthetic with sedation. The authors conclude that the 3D mesh system lends itself to local anaesthetic repair but is also an ideal training technique, allowing the surgical trainee to provide a quality service to the patient while gaining surgical training expertise.

From India, we have a descriptive paper outlining an ambulatory technique for the treatment of fistula-in-ano using sub-mucosal ligation of the fistulous tract in 13 patients. The authors describe their technique in detail and recommend its uptake based on their experience of it being safe and easy to perform.

Finally, from Malaysia we have an overview of the development in recent years of ambulatory facilities and results in that country. This article provides an interesting insight into ambulatory progress in a developing country with a headline day surgery rate of about 30% allowing other similar countries to benchmark their progress.

Happy reading!

Doug McWhinnie

Editor