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Prof .dr. Biljana Eftimova was born on June 29, 1962 in Shtip. She received his primary and secondary education in her hometown. In 1980, she enrolled atFaculty of Medicine at the University "St. Cyril and Methodius" - Skopje and graduated in1985. Since 1986, she has been working as a trainee in the Department of Emergency Medical Assistance in the Medical Center in Shtip. Specialization in anesthesiology, resuscitation and intensive care ends in 1993. After specialization, until today, she works in The anesthesia, resuscitation and intensive care service in Shtip. She is Head of Anesthesia,Reanimation and ICU at Clinical Hospital Shtip.

ENVIRONMENTAL SUSTAINABILITY IN ANESTHESIA PRACTICE

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Climate change is defined as the world's greatest global health challenge of the 21st century , leading to a global call for action in the health community .International organizations such as the Intergovernmental Panel on Climate Change ,call for fundamental and transformative change at every level of our personal and professional lives [2]. Health care pollution itself harms public health4 and can indirectly increase the cost of health care by increasing the demand for services. Global warming affects human life and health in many ways: the essential elements of healthy living – drinking water, nutritious food, clean air are under threat. The healthcare sector significantly contributes to the climate crisis, accounting for over 4% of global CO2 emissions [3, 4]. Furthermore, healthcare practices lead to smog formation, acidification, the release of carcinogenic and non-carcinogenic air toxins, and waste production..The health implications associated with climate change are increasingly widespread. Climate change could undermine the progress made in global health for decades.

As a highly technical, resource-intensive discipline, anesthesia practice accounts for a significant portion of health-care's CO2 emissions [8–10]. With growing calls to address the significant role of anesthesia practice in exacerbating climate change, volatile anesthetics have received increased attention, primarily due to their potent greenhouse gas properties. These volatile anesthetics undergo minimal in vivo metabolism and are released into the troposphere with minimal changes, accounting for over 95% of their emissions [11]. Inhaled anesthetics can account for 50% of perioperative emissions [13] and 5% of hospital emissions [14]. Additionally, 30% of daily medical waste is produced in operating rooms; anesthesia practice is responsible for approximately 25% of it, of which 40% is potentially recyclable [15]. Inhaled anesthetics are an obvious target for mitigation and simple practice changes could reduce emissions.7 Reducing waste by decreasing excess fresh gas flows is one of the simplest ways to reduce pollution and facility costs, without affecting care quality.
In recent years, numerous anesthesiology societies have published recommendations on how anesthesiologists can contribute to a reduction of the CO2 footprint [16–18]. The World Federation of Societies of Anesthesiologists has outlined core principles to guide anesthesia providers in the transition to environmentally sustainable practice, including choosing medications and equipment; minimizing waste and overuse of resources; and addressing environmental sustainability in education, research, quality improvement, and leadership activities .
There is no human health without planetary health.

Key words: Climate change, sustainability, anesthesia practice, pollution.