Pioneering the Future by Respecting the Past: A Glimpse into the History Of Interventional Radiology in Nepal

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Interventional Radiology (IR) is a dynamic and rapidly advancing field of medicine. It has gained popularity, acceptability and global recognition for its minimally invasive nature and remarkable contributions to patient care. It has become an indispensable part of patient care in current practice in the world.

The practice of interventional radiology in Nepal has its roots in the broader field of radiology, which itself witnessed significant growth and development in the past few decades. The inception of interventional radiology in this country, much like elsewhere in the world, was driven by the need to explore innovative ways to diagnose and treat complex medical conditions. The journey, marked by challenges and successes, showcases the resilience and adaptability of the Nepalese medical community.

Although interventional radiology practice in Nepal has been thriving in recent years, its origins trace back to the late 19th century. The inaugural image-guided biopsy took place at Bir Hospital in the 1980s. Interventional radiology began its journey with the initiation of image-guided biopsies at Bir Hospital in the 1980s. At that time, the pioneers in interventional radiology at Nepal's esteemed institution, Tribhuvan University Teaching Hospital, recognized the necessity for interventional radiology and initiated a range of innovative techniques and procedures. While the shortage of essential equipment initially posed a significant challenge, the unwavering commitment of healthcare professionals to adapt to changing times and their dedication to patient care prevailed. They successfully carried out procedures such as angiography, embolization, various drainage techniques, biopsies, and troubleshooting procedures, enabling them to assist their fellow medical practitioners with ingenuity and patient-centered care.

In this editorial, we would like to acknowledge the pioneers and practitioners who have tirelessly worked to shape the landscape of interventional radiology in Nepal. I wish to recognize and pay tribute to the pioneers in the field of interventional radiology all those who have continued their legacy by advancing the practice. They were the trailblazers who introduced modern techniques, technologies, and methodologies into the local healthcare system. These dedicated professionals undertook the formidable task of bridging the gap between traditional medical practices and the latest advancements in interventional radiology.

Historically, Nepal faced unique challenges in terms of healthcare infrastructure, availability of resources, and the geographical diversity of the country. However, despite these hurdles, interventional radiology gradually gained a foothold. It has evolved into a crucial component of healthcare delivery, offering minimally invasive alternatives to open surgery, addressing effectively various complications of open surgical procedures and contributing to the overall well-being of patients.

Presently, interventional radiology in Nepal has progressed to encompass procedures such as tumor ablations, embolotherapies for diverse medical conditions, and the management of portal hypertension,

including techniques like TIPS and BARTO. Nonetheless, several challenges persist within the field, including the associated procedural costs, accessibility to essential equipment, availability and accessibility of interventional services to regional, provincial hospital and medical colleges and the absence of formal training programs in Nepal.

As we celebrate the history of interventional radiology in Nepal, we must also look forward to the future. The coming years will undoubtedly bring new challenges, as well as exciting opportunities for growth and innovation in the field. By acknowledging and understanding our past, we are better equipped to appreciate the progress that has been made and envision the path ahead. To extend these services to underserved patients across the nation, we depend on the solidarity and support of our medical colleagues. Achieving this necessitates raising awareness within our professional circles and persistent advocacy for the establishment of healthcare facilities dedicated to interventional radiology.

In conclusion, the history of interventional radiology in Nepal is a story of resilience, adaptation, and progress. It reflects the commitment of the healthcare community to provide the best possible care to their patients. This editorial serves as a tribute to the pioneers of interventional radiology in Nepal and as a call to embrace the future with the same enthusiasm and dedication. By doing so, we can ensure that the field continues to thrive, benefiting both patients and the medical community in Nepal.