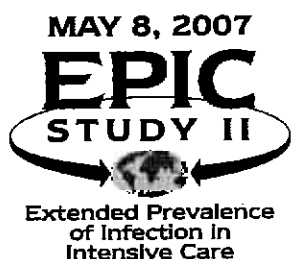


The EPIC II Study



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On April 29, 1992, the European Prevalence of Infection in Intensive Care (EPIC) study collected data from more than 10,000 intensive care unit (ICU) patients in 17 countries in Western Europe (Vincent et al. 1995). This one-day point prevalence study investigated the prevalence of ICU-acquired infections,

ologic source of reference for the status of nosocomial infection in Europe at that time.

On May 8, 2007, EPIC II (The Extended Study of Prevalence of Infection in Intensive Care) was conducted to provide an updated epidemiological data-

risk factors for these infections, the predominant infecting organisms, patterns of antimicrobial resistance, and the relationship between ICU-acquired infection and mortality. The results from EPIC

base on infection in the ICU, 15 years after the original EPIC. Importantly, EPIC II was extended from Europe to the rest of the world and has been a substantial success with more than 2,000 ICUs participating, and more than 10,000 patients registered. Figure 1 (see below) shows those countries with the greatest number of participating ICUs, but we have also had patients registered from many other countries, including Yemen, Malta, Nigeria, ... even the Solomon Islands! The EPIC II database will allow us to address a number of fundamental questions related to the presence of ICU infection throughout the world, and will lead to a number of publications. Such epidemiological information is

vitaly important in increasing and maintaining awareness of the impact of ICU infection, in developing local and international management policies for infection diagnosis and treatment, and in ensuring adequate resource allocation.

Data from this exciting collaborative project is still being collected, notably for patient outcome, but we are already beginning to analyse the preliminary results and the initial data will be presented at the ESICM meeting in Berlin this year.

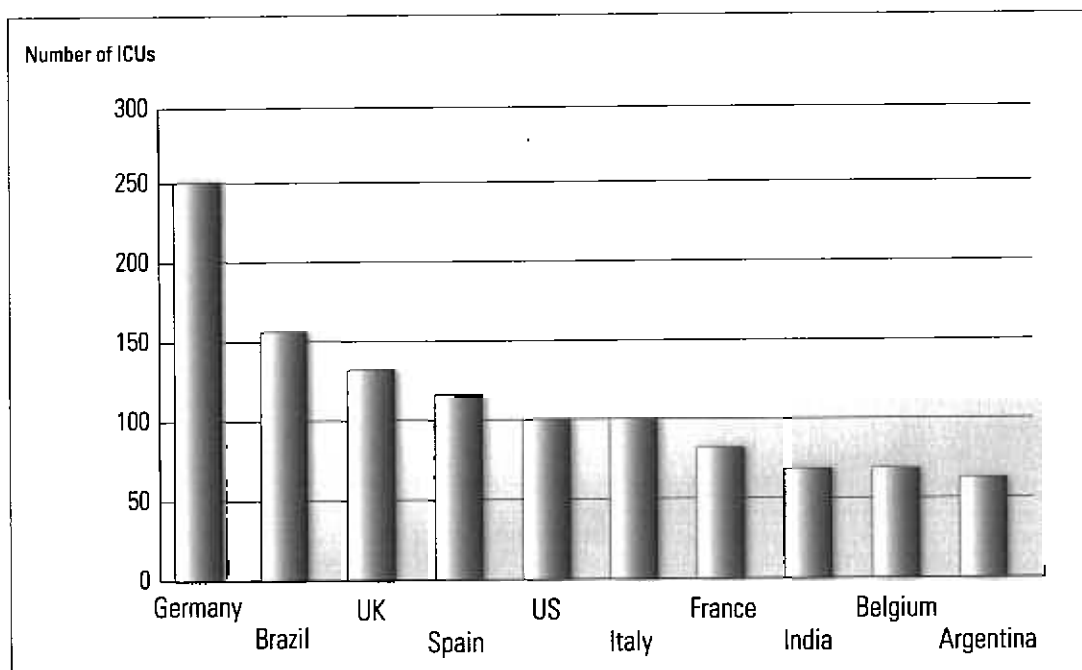


Figure 1. The ten countries with the largest number of ICUs contributing patients to the EPIC II study.