Location and timing
Meeting Date: 24.10.2018
Meeting Start Time: 7:30 AM
Meeting End Time: 9:00 AM

Attendees
Genaro de Pascale excuses his presence.

1. Welcome.
J De Waele welcomes all the attendees.

2. 2018 ESICM meeting INF section input - INFECTION track @ LIVES.
J De Waele summarizes all the activities in Lives 2018 proposed by the INF section. It is outstanding that the current meeting (Lives2018) has included more sessions about infections in the ICU than in previous years. These are as follows:
- PG course on antimicrobial use
- Lives2018
  General sessions
  PKPD in the critically ill (Continuous professional education)
  Antimicrobial use in the ICU: Focus on antimicrobial resistance (State of the Art)
  Improving infection management at the bedside
  Managing pneumonia in the ICU
  Rationalizing antibiotic use
  Intra-abdominal infections
  Antimicrobial stewardship
Clinical Challenge Session
  Fever
  Antibiotics in obesity
Debate
  Safely stopping antibiotics - guidelines, biomarkers or common sense?

3. INF section courses

J De Waele explains the strict criteria for speaker selection: Diversity, age, and participants from other continents.
Many attendees propose a PG course on antimicrobial treatment.
M Leone considers that new guidelines developed by the group should be presented in LIVES.
J Lipman proposes “Bacterial dynamics and human dynamics”. J De Waele thinks this is a topic for a joined section with Systemic Inflammation and Sepsis.
JK Schouten proposes functional immunological testing in ICU patients.
C Agvald-õhman proposed a joined section with nurses to treat the topic of infection control including catheter-related bloodstream infection.
JF Timsit considers that pneumonia (CAP and hospital-acquired pneumonia) should be included every year in the programmes. He also proposes to treat a specific pathogen like Klebsiella spp.
Ignacio and J Rello support that pneumonia should be part of the programme, including rapid tests, CAP and new antibiotics.
Finally, J De Waele demands ideas for new formats: case discussions, pro-con debates.

5. INF section Research initiatives

a. ABSES: S Blot presents the results of this observational study about intra-abdominal infections in the ICU. After data base cleaning, 2621 patients have been included. A total of 309 ICUs from 42 countries have participated.
b. DIANA: A total of 147 ICUs from 28 countries have participated. L de Bus explains the preliminary analysis with 1367 patients. The coordinating board considers that the first manuscript will be submitted in the first months of the next year.
c. EURECA: R Sonneville explains the aims of this study: to describe the epidemiology and outcomes of patients admitted to the ICU with all-cause acute (meningo-)encephalitis. The study is ongoing since June 2017 and it’s expected to finish in June 2019. Clinicaltrial.gov registration: NCT03144570. Actually, there are 64 active centers.

6. Future projects

a. Eurobact II: J De Waele congratulates JM Timsit and his team. This project has been granted by the Research Committee of the ESICM. The design is very similar to Eurobact I, carried out in 2010. All hospital and ICU-acquired bacteremia will be included.
b. AURORA project: Jan De Waele explains this new project: Annual Survey of Antimicrobial Resistance in intensive care. The primary objective is to describe the prevalence of colonization and infection with antibiotic resistant pathogens in critically ill patients. The day for the first survey (in 2019) has not been decided yet. One-day prevalence study. This will
study in 2019 due to the problems for ethical approval in some countries. M Bassetti and J De Waele will lead this project.

7. Guidelines in development.

a. Consensus Guideline on Antibiotic TDM in ICU in collaboration with ESCMID WGs, International Association for Therapeutic Drug Monitoring and Clinical Toxicology (IATDMCT) and International Society of Chemotherapy (ISC). Current collaborative paper underway led by Jason Roberts and Jan De Waele.

b. Guidelines on de-escalation therapy. Jose Garnacho-Montero explains the current situation of this project. The first draft has been sent to all the members of the panel at the beginning of October. The manuscript will be submitted to Intensive Care Medicine in the first months of the next year.

c. Pneumonia: D Koulenti and J Rello proposes a dissemination project to increase the impact of these guidelines on the daily practice. JF Timsit asks about the financial support from the Society: it is not possible to perform a good job without financial support. All agree with this and J DeWaele will request financial support from the ESICM for the section activities (Round tables about MDR and Guidelines).

d. Guidelines about MDR infections (with ESCMID). This is an initiative of the ESICMD coordinated by Jesus Rodriguez-Baño. Jan De Waele and Jose Garnacho-Montero participate by the ESICM.

e. Ignacio Martin-Loeffes has proposed a new project: Guidelines for the management of severe Community-acquired pneumonia. This project will be carried out in collaboration with the ERS and ESCMID.

Jan De Waele explains that the ESICM will endorse a guideline only if the society has been informed and involved since the onset of the process.

8. Systemic Inflammation and Sepsis Group Collaboration
This WG required proposals and suggestions about the topic: Gaps in Sepsis.


• The ESICM Trials Group Award in 2018 with €50,000 been divided into three projects (one of them EUROBACT II). This has been a very controversial decision. The justification was that the grant had been thought for a randomized control trial and none of the projects had this design.

• The ESICM Research Committee is also responsible for monthly surveys. Jan De Waele also encourages to all the members to submit surveys in the field of infections in the critically ill patient.

10. Update of the Working Groups
a. WG on Antimicrobial Use in ICU. B Borgatta updates the ongoing studies. She explains that there are actually seven studies underway in this WG. The situation of these studies will be presented with details in the meeting of this WG. J de Waele congratulates Barbara for leading this WG during the last year. Hendrik Bracht is the new chair of this WG.

b. WG on pneumonia. Dr Koulenti updates about Pneumolnspire enrollment. This is an international multi-centre prospective observational cohort study of nosocomial pneumonia in intensive care units. Actually, more than 1350 patients have been included. Patient recruitment has been extended to the end March 2018. The Group also is also working on guidelines regarding the Non-pharmacological prevention of VAP. The group will also develop a survey on VAP management led by Dr Andrea Cortegiani in collaboration with Prof. Grasselli.

11. ECDC Collaboration
Alain Lepape explains that ARISE study has been submitted to EuroSurveillance. The European Commission HAI-Net mortality review and validation and reproducibility study. Evaluation of the feasibility of 3 tools. Aspergillosis in non-immunosuppressed patients with influenza. A paper from the Netherland was published in Lancet Respiratory Medicine. ECDC wants to know. A new survey about Aspergillosis in non-immunosuppressed patients with influenza. All who are interested should contact A Lepape.

12. ESICM Academy
The ESICM Academy is making very significant progress in the volume and quality of the learning material available to ESICM members. The Infection Section has participated, and this collaboration has been coordinated by S Nseir. Actually the 135 authors, 51 reviewers and 33 editors have been enrolled in the elaboration of this learning material.

13. Any other business
José Garnacho-Montero and Jan De Waele finish their mandates. Both thank to all the members of the section for their active collaboration. Elections will be in spring. Jan and Jose wish luck to Pedro Povoa, new chair of the section and Andrew Conway Morris, new deputy of the section.

Without any other suggestion or proposal, the meeting ends at 9.30.