

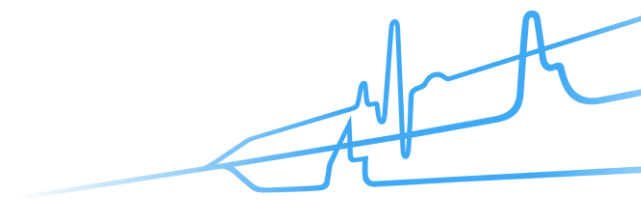


The Intensive Connection

Meeting INF section 28/10/25
Lives 2025 munich

Chair
Hendrik Bracht

Together
WE ARE INTENSIVE CARE
JOIN OUR ICU COMMUNITY
#weareicu #togethericu #criticalcare #intensivecare



1. Greetings, Introduction

Report from the representatives in the committees:

2. Research committee (Gennaro de Pascale)
3. Clinical Training committee (Fredrik Sjöval)
4. Social Media committee (Hannah Wozniak)
5. E-Learning committee/ ACE courses (Christian Lanckohr)
6. Congress committee/Education (Hendrik Bracht)
7. Antimicrobial Stewardship for Severe Infections Learning Pathway
levels of Education, Future plans for pre-congress Events update (Hendrik Bracht, Marc Leone)

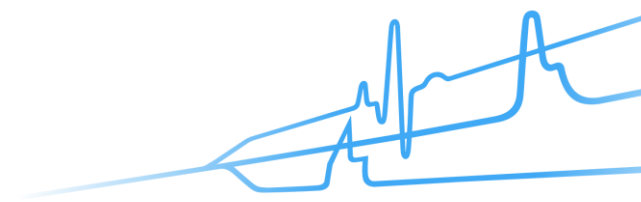
Research:

Ongoing Studies:

8. AB-ICU Study update (Fredrik Sjöval)
9. EMPRESS Study
10. Daliz Report update (Claire Roger)

Strategy: (Hendrik Bracht)

14. Varia
15. Handover to new section chair Gennaro de Pascale



Reports from the representatives



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2. Research committee (Gennaro de Pacale)



Research Committee 2024 - 2025

WHO'S WHO

THE RESEARCH COMMITTEE_2024-25



IGNACIO MARTIN-LOECHES
Chair of the Research
Committee
Ireland



JOHN LAFFEY
Chair-Elect
TRANSBIO
Ireland



MICHAEL KOEPPE
APM
Germany



SILVIA DE ROSA
AKI
Italy



TÀI PHAM
ARF
France



MATTHIEU JOZWIAK
CD
France



ARI ERCOLE
DS
United Kingdom



NIKOS EFSTATHIOU
ETH
United Kingdom



DANIEL GOMES
FREM
Portugal



SIGAL SVIRI
HSRO
Israel



GENNARO DE PASCALE
INF
Italy



VIRGINIA NEWCOMBE
NIC
United Kingdom



BENJAMIN CHOUSTERMAN
SIS
France



**STEPHAN
KATZENSLAGER**
TEM
Germany



ISABEL SPIRET
PHARMA
Belgium



ALESSANDRO GALAZZI
N&AHP Representative
Italy



MOHAMED ALEBSAWY
NEXT Representative
United Kingdom



GAETANO SCARAMUZZO
NEXT Representative
Italy

Research Awards 2025 – update September 2025

- **In 2025: 14 awards for a total sum of €295,000**

- We received 128 valid short applications.
- Pre-selection meeting held after review on 23 April.
- We retained 42 projects for the 2nd phase (full application).
- Jury meeting 1 September.

Awards ceremony on Tuesday 28 October at 10:00 in Room 1 = Auditorium

Past awards session on Tuesday 28 October at 10:40 in Room 2



Giant Great Grant – max 300K – 3 years



- Second call is closed.
- Jury meeting set on Tuesday 23 September
- **Scope:** rapid diagnostic-driven antibiotic stewardship

The scope is better specified. Studies should aim to demonstrate how rapid ID/AST can lead to:

- Improved appropriateness of empirical antimicrobial treatment, including early escalation or early de-escalation.
- Decreased antimicrobial consumption and development of resistance.
- Improved patient-centered outcomes such as reduced length of stay, complications, etc
- Practical integration into clinical workflows and clinical decision-making

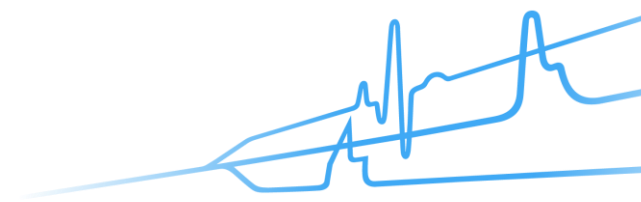
Proposals will be evaluated based on:

Scientific and clinical significance

Methodological rigor and feasibility

Expertise and track record of the research team

Potential for meaningful clinical impact in ICU care



Guidelines – Statements – Position Papers recently published 2023-2025

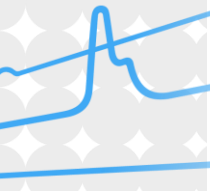
- Ostermann, M., Alshamsi, F., Artigas Raventos, A. *et al.* European Society of Intensive Care Medicine Clinical Practice Guideline on fluid therapy in adult critically ill patients: Part 3—fluid removal at de-escalation phase. *Intensive Care Med* (2025). <https://doi.org/10.1007/s00134-025-08058-x> Published online on 19 August 2025.
- Mekontso Dessap, A., AlShamsi, F., Belletti, A. *et al.* European Society of Intensive Care Medicine (ESICM) 2025 clinical practice guideline on fluid therapy in adult critically ill patients: part 2—the volume of resuscitation fluids. *Intensive Care Med* (2025). <https://doi.org/10.1007/s00134-025-07840-1>. Published online on 31 March 2025.
- Beil, M., Alberto, L., Bourne, R.S. *et al.* ESICM consensus-based recommendations for the management of very old patients in intensive care. *Intensive Care Med* **51**, 287–301 (2025). <https://doi.org/10.1007/s00134-025-07794-4> . *Intensive Care Med* (2025). Volume 51, pages 287–301, (2025). Published online on 17 February 2025.
- Wieruszewski et al. **Reporting of Norepinephrine Formulations in Critical Care** from the Society of Critical Care Medicine and European Society of Intensive Care Medicine Joint Task Force. *Critical Care Medicine* (2024).
- Grasselli et al. **ESICM guidelines on acute respiratory distress syndrome: definition, phenotyping and respiratory support strategies.** *Intensive Care Med.* 2023 Jul;49(7):727-759.
- Martin-Loeches et al. **ERS/ESICM/ESCMID/ALAT guidelines for the management of severe community-acquired pneumonia.** *Intensive Care Med.* 2023 Jun;49(6):615-632.



Guidelines, Statements, Position Papers

A selection of ongoing work:

- **Guidelines on shock diagnosis & hemodynamic monitoring in the ICU.** - Xavier Monnet (France), Michelle Chew (Sweden).
 - Manuscript is in preparation (update Oct. 2024)
- **Fluid therapy Guidelines** - Daniel De Backer (CHIREC, Brussels, Belgium) and Morten Hyllander Møller (University Hospital Rigshospitalet, Copenhagen, Denmark).
 - First part published. Work on the second part is nearing completion (update Oct. 2024).
- **AMS stewardship for severe infections and sepsis guidelines.** De Waele (Belgium) and Garyphallia Poulakou (Greece)
 - **Nearing completion - Methodology issues (Update Oct. 2024)**
- **Transfusion Guideline part III** - Alexander Vlaar, Amsterdam, The Netherlands.
 - The group works on the last two recommendations (update October 2024).
- **Consensus on PET CT scans in ICU Patients** (Hendrik Bracht, Sascha David for ESICM)

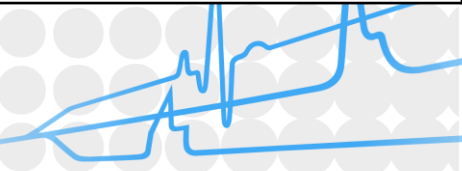


Active Surveys – update September 2025

Contact person	Acronym	Title
M. Ostermann	APPs	Integration of Advanced Practitioner roles in Intensive Care
U Balaban	-	A Review of Clinical Pharmacy Services in Adult Intensive Care Units: An International Cross-Sectional Study
R Bourne	-	Medication Safety in Intensive Care Units Survey
M Mauget	Pneumoscope	Practices of NEUromonitoring in Meningitis caused by StreptoCOccus Pneumoniae: An European, multicenter, cross-sectional survey
A van Zanten	CARE	Continuous and Alternative Routes for Enteral nutrition delivery in the intensive care unit
S Andersen	-	Use of Palliative Care and Advanced Life Support in Acute on Chronic Liver Failure
M Haar	CUPIDO	CURrent Practices of Intensive care for the management of acute respiratory Distress syndrome in EurOpe (CUPIDO)
L. Lamamri	OPTI-VAP	OPtimal Timing for initiating antibiotic therapy in non-severe Ventilator Associated Pneumonia in intensive care units.
H Quintard	BDA	Acute External CSF Drainage Strategies in Adult Neurocritical Care

Recently endorsed projects

Contact person	Acronym	Title
M. Chew	SICU II	Sepsis in the ICU-II: Precision medicine models for sepsis-induced myocardial dysfunction
A. Sarwal	CIRCULATE-MCS	Cerebrovascular Investigation Related to Circulatory parameters Using Longitudinal Assessments on Transcranial Doppler based Evaluation in Mechanical Circulatory Support
A. Feldheiser	POP-OUT	Association of intraoperative hemodynamic characteristics to postoperative complications and Mortality
G. Hernandez	ANDROMEDA-PEGASUS	Can pulse pressure assessment at the bedside detect low values or track changes of stroke volume in critically ill patients?
A Vlaar, A De Jong	AI-CARE	Healthcare Professionals' Perspectives on AI Integration in Clinical Practice: Current Applications and Legal Considerations (AI-CARE)



3. Clinical Training committee (Fredrik Sjövall)

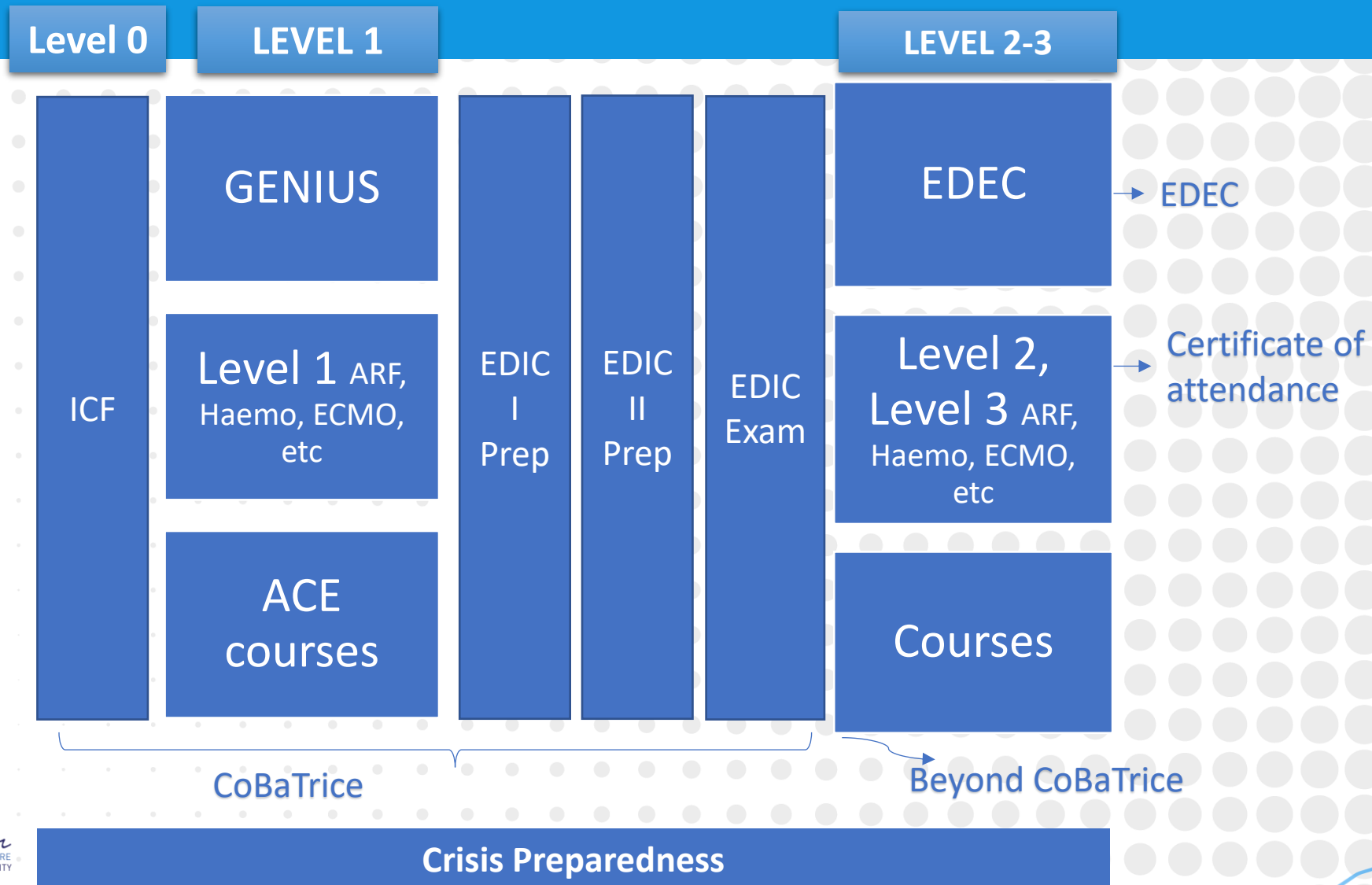




Transition Academy (AC) 2024+

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Educational offer in a nutshell



Previous Education and Training Committee (ETC) Structure

Education and Training Committee

Clinical Training Sub-Committee

E-learning Sub-Committee

EDIC exam Sub-committee

EDEC committee

CoBaTrICE committee

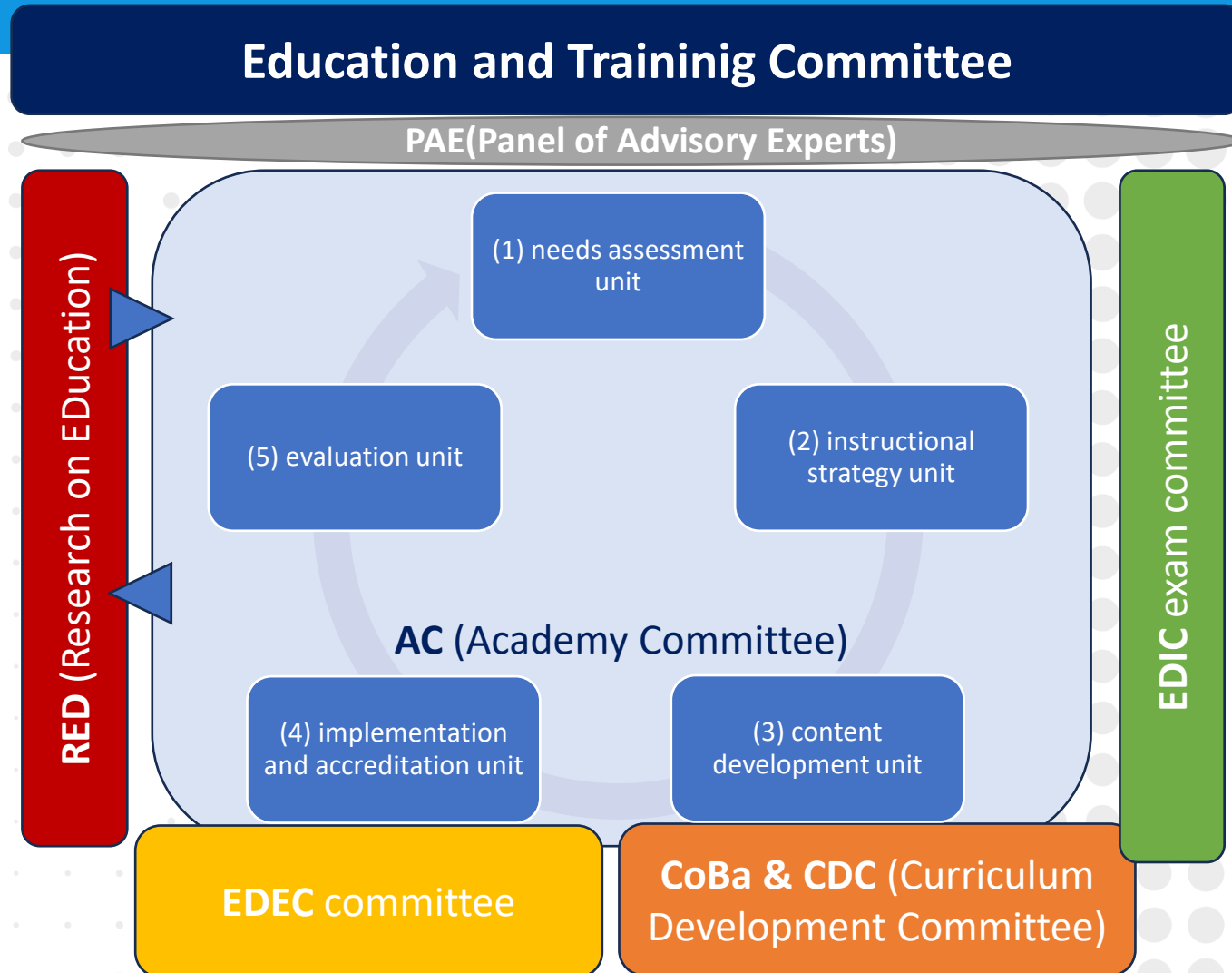
Previous structure included:

- **CTC Sub-Committee's** mission was to develop the training programmes for intensive care medicine, based on CoBaTrICE. However it involved mainly observation and feedback.
- The **e-learning Committee's (eLC)** commissioned and reviewed the ACE courses (online modules) available in the e-learning platform of ESICM.
- The **EDIC Examinations Sub-Committee** is responsible the examination for European Diploma in Intensive Care Medicine
- The **EDEC Sub-Committee coordinates** is responsible for the organisation and delivery of the curriculum on advanced echocardiography in intensive care medicine.
- **CoBaTrICE** maintained and developed the CoBaTrICE programme on behalf of the Society up to EDIC level (see next slide)



New ETC structure

RED Taskforce (new in the SOP)= Boost research in education & Publish to gain credibility



PAE= internal structure to retain expertise and consolidated internal capacity in all ETC sub-committees



Main activities AC Sub-Committees

Unit #1

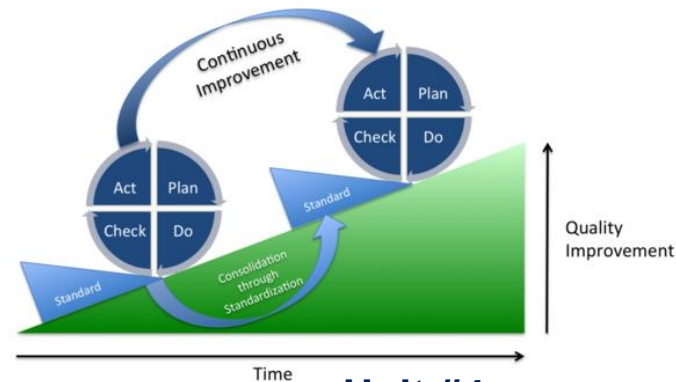
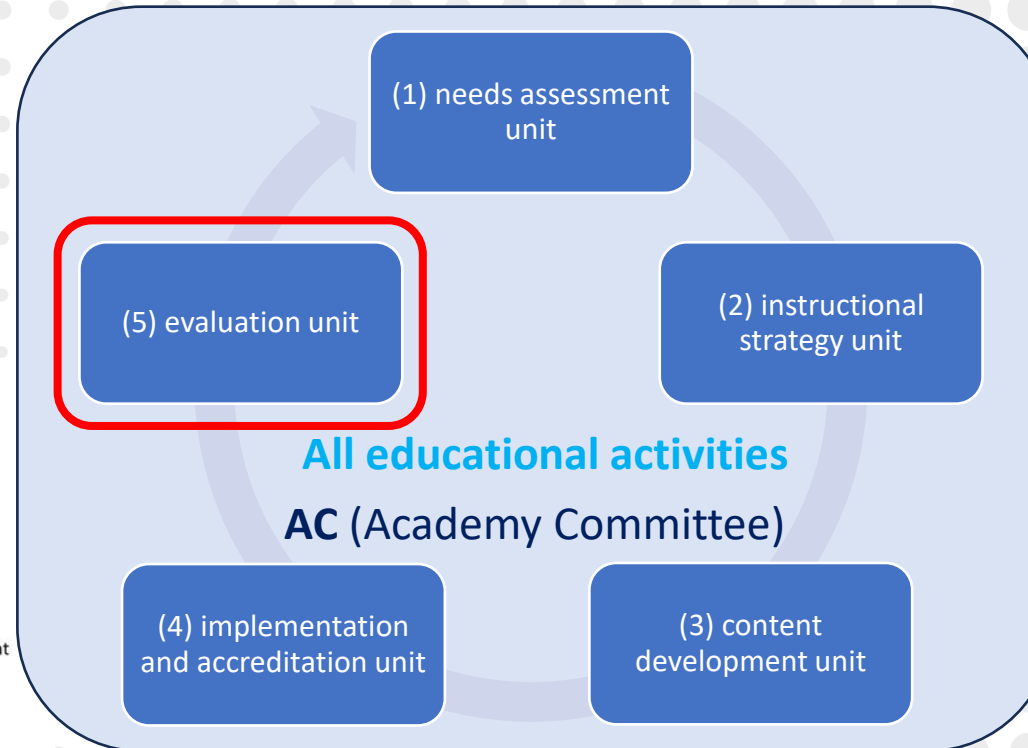
- Improve & **conduct regular needs assessment** activities / interest $\neq$ gap & need

Unit #2

- **Consolidate educational processes** following the CME principles
- **Evaluate educational methods, centralized vs localized education** following best practices in C19_SPACE, WHO and ICF
- **Encourage transfer** of what is being learned to clinical practice.
- Close collaboration with CoBa & CDC Sub-committee

Unit #3

- **Engage** contributors/ Continue to support content development and ensure correct communication with all sections



Unit #4

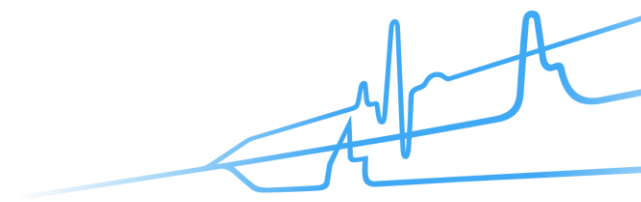
- **Accreditation of programmes (ongoing)** Education **Delivery** Possibly **accreditation of fellowship** centres in the future

Members of WU5:

- Katerine Astrup
- Sarah Benghanem
- Gianluca Castellani
- Ilaria Godi
- Slavica Kvolik
- Giuseppe Marini
- Bryan O'Farrell
- Raj Saha
- Fredrik Sjövall
- Margo Van Mol
- Adam Woodman-Bailey

EDIC examiners supporting WU5:

- Vladimir Cerny
- Celeste Dias
- Christoph Erdbories
- Barbara Ficial
- Marco Goeijenbier
- Anil Kambli
- Verena Koehl
- Yazine Mahjoub
- Ramprasad Matsa
- Elisabete Monteiro
- André Pinto
- Daniel Rapple
- Stephen Sciberras
- Thomas Uhlig
- Josep Paul Vella

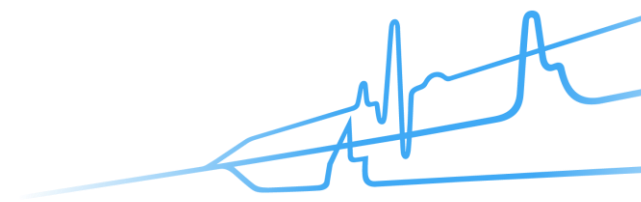


4. Social media committee (Hannah Wozniak)



A Successful Year for Our Section Webinar

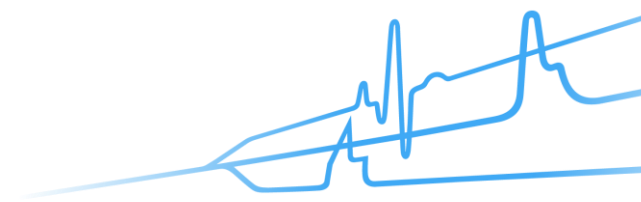
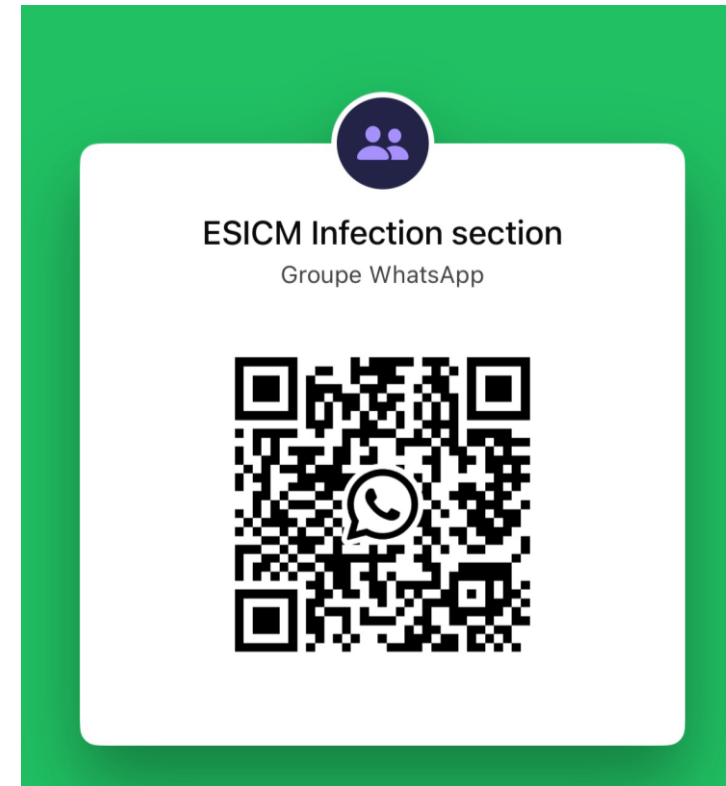
- Our 2025 webinar *“Infection Section: Round Table”* was a great success!
- Date: 20 February
- Peak Live Viewers: 180
- Page Views / Replays: 4,299
- Unique Users: 1,651
- Excellent engagement and participation from across Europe
- Thank you to all speakers and attendees for contributing to this event!



Let's Stay Connected!

- We want to make our Infection Section more interactive and connected
- Proposal: Create a WhatsApp group for section members
- Purpose:
 - Share updates, webinars, and opportunities in real time
 - Strengthen networking and collaboration
 - Encourage informal discussions and exchange of ideas

Join us!
Scan the QR code/ screen to join the group OR contact
Hannah.Wozniak@hug.ch



5. E-learning committee (Christian Lanckohr)



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Airspace

AIRSPACE

[LIVES-STREAM](#)[Online medialibrary](#)[e-Learning](#)[ICM Journals](#)[Contact us](#)

Antimicrobial Stewardship Practical guidance

Your antimicrobial compendium, just a click away

The ESICM Airspace WebApp is a bedside tool for intensive care professionals treating patients with severe infections.

It draws on the latest scientific publications, guidelines and health data to help healthcare professionals determine their infection management choices, with the ultimate objective of improving patients outcome and positively impacting Anti-microbial Stewardship.

The WebApp is **exclusively accessible to ESICM members**.

[ACCESS AIRSPACE](#)[BECOME AN ESICM MEMBER](#)



About us Science & Research

Home > Education > AMS Certificate Program

"I am privileged to see the participants become AMS ambassadors supporting AMS development worldwide!"



Jeroen Schouten

AMS Certificate programme director

Antimicrobial

The Antimicrobial Stewardship (AMS) Certificate Program is an early-career healthcare professional specialty training or actively engaged in the field of AMS.

modules are available online and on-site across Europe. Our modules cover a range of topics, connecting a group of diverse professionals with global experts to discuss clinical and scientific advancements in the field of AMS.

Education

Antimicrobial use in Intensive Care and the emergency department

Event Description

📅 03 - 04 February 2026 📍 Online 🖥️ Online

ACE Courses by the Infection Section

– **A few little steps were taken**

- ACE Course „*Antibiotic Essentials*“ → was updated
- ACE Course „*Pharmacokinetics and Pharmacodynamics*“ → given to the Pharmacy Section
- ACE Course „*Infection Prevention and Control*“ → changed to include prevention of pneumonia (Ana Hernandez, finished), CLABSI (Salvatore Cutuli, finished) and CAUTI (I´m currently writing this..)

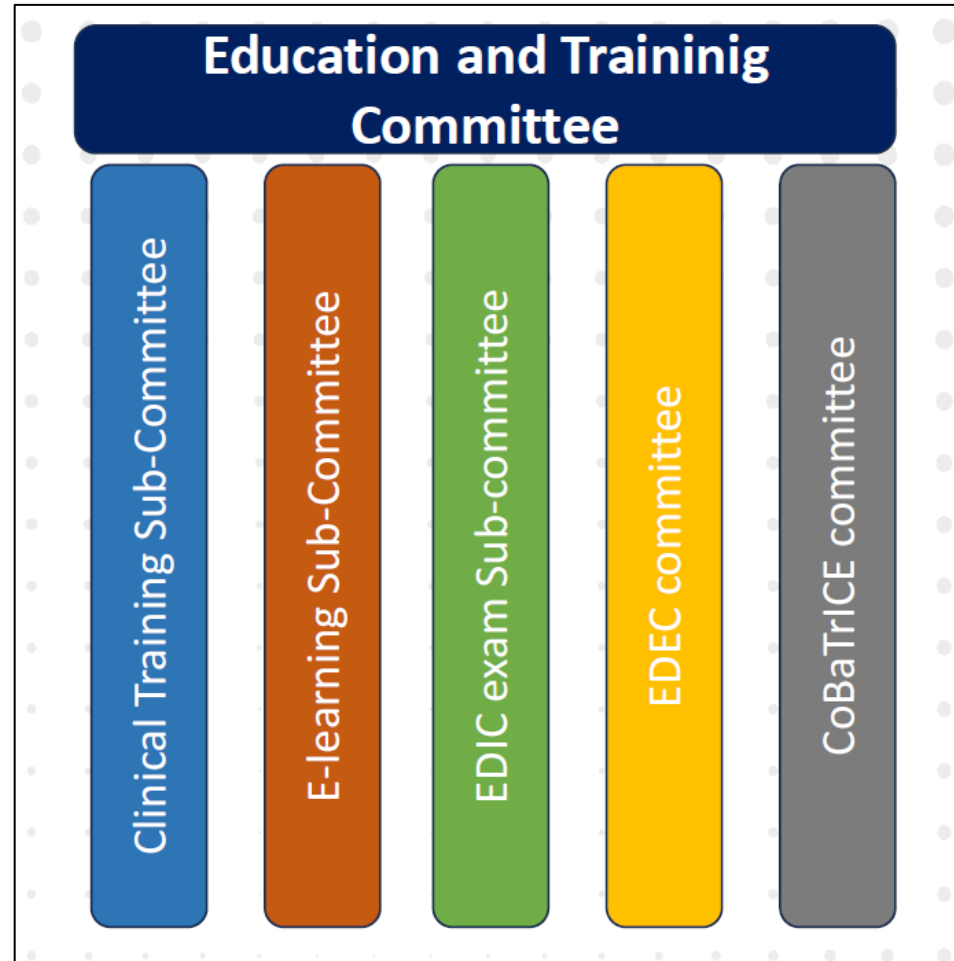
– **Still, it remains difficult to actually get people to contribute.**

The diagram illustrates the progression of crisis preparedness training, organized into levels and components:

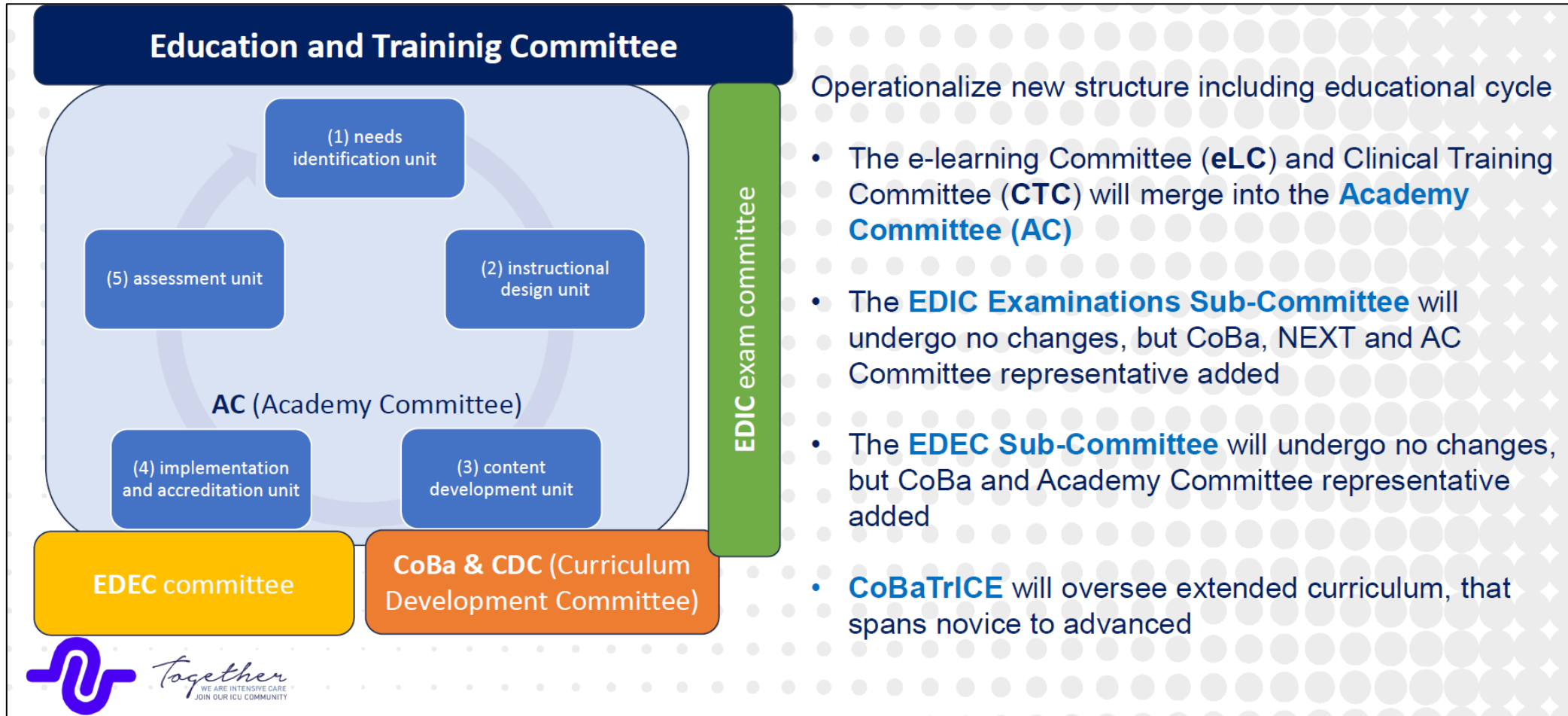
- Level 0:** ICF
- LEVEL 1:**
 - GENIUS
 - Level 1 ARF, Haemo, ECMO, etc
 - ACE courses
- EDIC I Prep**
- EDIC II Prep**
- EDIC Exam**
- LEVEL 2-3:**
 - EDEC
 - Level 2, Level 3 ARF, Haemo, ECMO, etc
 - Courses

A bracket labeled **CoBaTrice** spans from Level 0 to the EDIC Exam. An arrow labeled **Beyond CoBaTrice** points from the EDIC Exam to Level 2-3. A bottom bar is labeled **Crisis Preparedness**.

The “old” structure



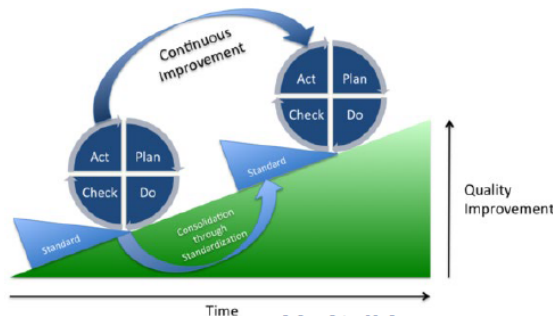
The future structure



Roles of the Working Units

Unit #5

- **Consolidate** the evaluation tools in all programmes
- Propose **workplace-based assessment** tools based on EPAs (formative assessment) next to the EDIC diploma (summative evaluation)
- **Apply PDCA** to entire ETC activities.
- Close collaboration with CoBa & CDC, EDEC and EDIC Sub-committee



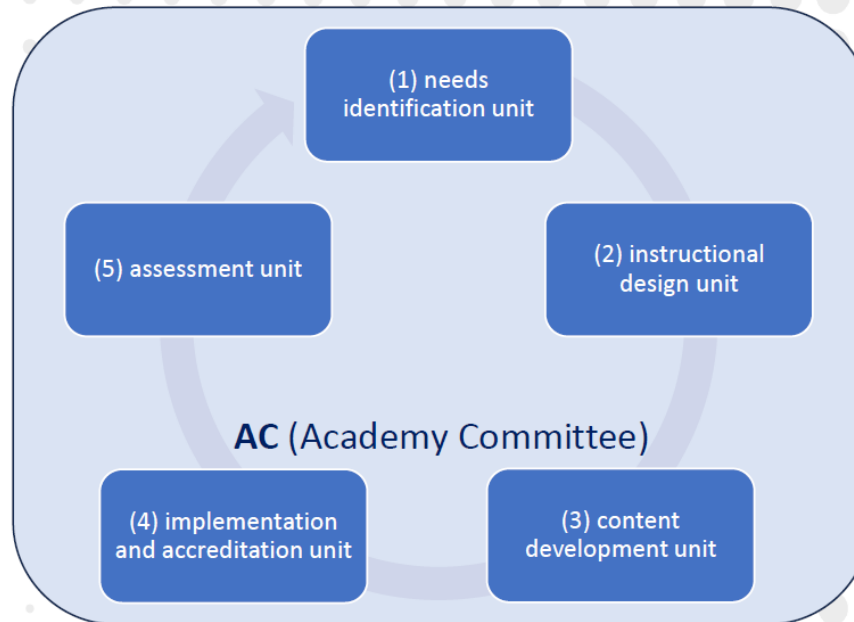
Unit #4

- **Accreditation of programmes (ongoing)**
Education **Delivery**
Possibly **accreditation of fellowship** centres in the future



Unit #1

- Improve & **conduct regular needs assessment** activities / **interest ≠ gap & need**



Unit #2

- **Consolidate educational processes** following the CME principles
- **Evaluate educational methods, centralized vs localized education** following best practices in C19_SPACE, WHO and ICF
- **Encourage transfer** of what is being learned to clinical practice.
- Close collaboration with CoBa & CDC Sub-committee

Unit #3

- **Engage** contributors/ Continue to support content development and ensure correct communication with all sections

6. Congress committee (Hendrik Bracht)



Together
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Congress committee Hendrik Bracht

LIVES
2025
OCTOBER 25-29
MUNICH

EVENTS
25 October 2025

38th Annual Congress – Munich

The 38th Annual Congress, “LIVES,” will take place in Munich from October 25-29, 2025, at the International Congress Centre Munich (ICM).

[View Event Details →](#)



Facts about LIVES 2024 – INF Section

13 Sessions with INF involvement excluding pre-congress course

4 own INF Sessions (2 thematic, two Debates)

9 Joint sessions together with SIS, FREM, Pharmacy, N&AHP, (Pharmacy),
Neuro

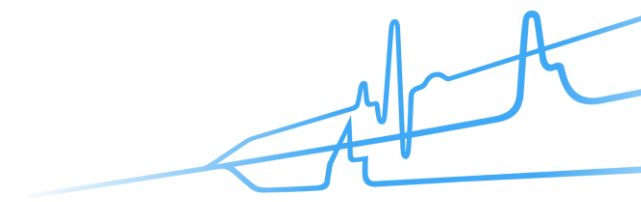
- 4** thematic sessions

- 3** clinical orientated debates

- 1** Debate

- 1** NEXT Session

9 INF poster sessions



Pre-Congress course

Main Congress

 Saturday 25 October

- 13:00 - 14:10

Developing expert practice in Sepsis, Severe Infections & Stewardship

Pre-Congress Course 

Education & Training Infection
- 14:10 - 15:10

Developing expert practice in Sepsis, Severe Infections & Stewardship

Pre-Congress Course 

Education & Training Infection
- 15:10 - 15:30

Developing expert practice in Sepsis, Severe Infections & Stewardship

Pre-Congress Course 

Education & Training Infection
- 16:00 - 16:45

Developing expert practice in Sepsis, Severe Infections & Stewardship

Pre-Congress Course 

Education & Training Infection
- 16:45 - 18:00

Developing expert practice in Sepsis, Severe Infections & Stewardship

Pre-Congress Course 

Education & Training Infection

 Sunday 26 October

- 09:00 - 12:30

Developing expert practice in Sepsis, Severe Infections & Stewardship

Pre-Congress Course 

Education & Training Infection
- 13:30 - 14:15

Developing expert practice in Sepsis, Severe Infections & Stewardship

Pre-Congress Course 

Education & Training Infection
- 14:15 - 15:00

Developing expert practice in Sepsis, Severe Infections & Stewardship

Pre-Congress Course 

Education & Training Infection
- 15:30 - 16:45

Developing expert practice in Sepsis, Severe Infections & Stewardship

Pre-Congress Course 

Education & Training Infection
- 16:45 - 18:30

Developing expert practice in Sepsis, Severe Infections & Stewardship

Pre-Congress Course 

Education & Training Infection

 Monday 27 October

- 08:40 - 09:30

Lecture - Fast microbiology: Is it everything we thought it could be?

NEXT Session 

Infection NEXT  Rising Star
- 09:20 - 10:00

Immunomodulation in severe infections: Tool or toy?

Debate 

Infection Systemic Inflammation and Sepsis
- 10:40 - 12:00

Blood stream infections revisited

Thematic Session 

Infection  Rising Star
- 15:00 - 16:20

ICM Year in Review 1

Thematic Session 

Acute Respiratory Failure Ethics Infection Neuro-Intensive Care Pharmacology and pharmacotherapy
- 15:40 - 16:20

A young man with infection and the kidney in overdrive

Clinical-Oriented Debate 

Acute Kidney Injury Infection Pharmacology and pharmacotherapy

 Wednesday 29 October

- 09:40 - 11:00

Brain infections: Antimicrobial and surgical management

Thematic Session 

Infection Neuro-Intensive Care Pharmacology and pharmacotherapy
- 11:30 - 12:10

My patient has fungi in his respiratory sample: To treat or not to treat?

Clinical-Oriented Debate 

Infection Systemic Inflammation and Sepsis  Rising Star

 Tuesday 28 October

- 08:30 - 09:10

Can we trust our microbiological diagnostics?

Debate 

Infection
- 10:30 - 11:10

Dynamic medication optimisation during extra-corporeal life support: Does it work?

Clinical-Oriented Debate 

Infection Pharmacology and pharmacotherapy
- 10:40 - 12:00

ICM Year in Review 2

Thematic Session 

Acute Kidney Injury Acute Respiratory Failure Cardiovascular Dynamics Data Science Infection
- 14:00 - 15:00

Joint with ISCCM - Global perspectives on Intensive Care

Thematic Session 

Health Services Research & Outcome Infection Research Systemic Inflammation and Sepsis
- 14:00 - 15:20

Antimicrobial prescribing behaviour: Can we improve it?

Thematic Session 

Infection
- 14:50 - 15:30

How do we include the microbiome in our daily practice?

Debate 

Infection  Rising Star

6

5

2

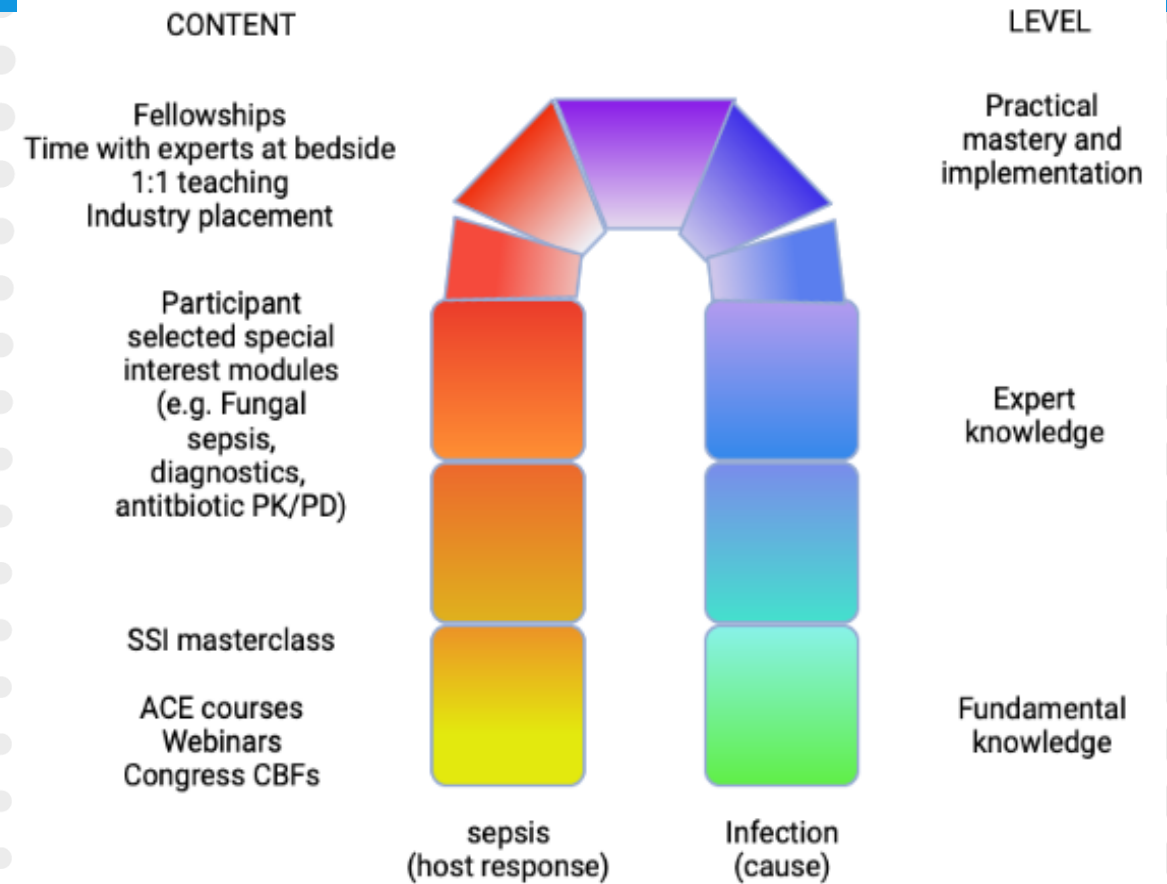


7. Antimicrobial Stewardship for Severe Infections Learning Pathway

Level 1

Level 2

Level 3



AMS Learning Pathway



The screenshot shows the ESICM website with the following elements:

- Header:** ESICM logo (European Society of Intensive Care Medicine) and navigation links: Login, Create account, and social media icons (Facebook, LinkedIn, Twitter).
- Menu:** ESICM, Events, Resources, Journals, Research, Education, Patient and Family.
- Section Header:** Antimicrobial Stewardship for Severe Infections Learning Pathway.
- Navigation Bar:** LIVES-STREAM, Online medialibrary, e-Learning, ICM Journals, Contact us.
- Text:**

The Antimicrobial Stewardship (AMS) for Severe Infections Learning Pathway has been re-launched!

It aims to facilitate understanding on the importance of antibiotic stewardship in the ICU, the role of a multidisciplinary and multi-professional approach, as well as the value of the diagnosis in the management of severe infections to avoid or reduce inappropriate use of antimicrobials.

A successful AMS requires international cooperation to control further development and spread of resistant pathogens, where the multidisciplinary and multi-professional approach becomes centre stage. The current training programme comes in line with the second key element of the EU guidelines on the prudent use of antimicrobials in human health "Antimicrobial prescribing and stewardship".
- Video Player:** A video player showing a thumbnail for "Immersive learning workshop on Antimicrobial Stewardship for Severe Infections at LIVES 2023" with a play button and a 03:17 duration.

- “Curricular” course on ABS in the intensive care unit
- Several “thematic sessions” live online, focus on interprofessional cooperation
- “fellowships” in selected clinics
- The course concludes with a workshop with “virtual reality” at the LIVES congress

Level 1



10 core elements

1. Definitions
2. Epidemiology (community vs hospital-acquired) / Risk factors
3. Clinical presentation, diagnostics and diagnosis
4. Management principles – Surviving Sepsis Campaign bundles
5. Specific core principles – antimicrobials (first dose) +/- source control
6. Organ support
7. Determination and management of different source of infection (including microbiology)
8. Special considerations (e.g. Immunosuppression) and specifics (antimicrobial stewardship)
9. Infection Control and Prevention and surveillance
10. Future prevention measures (e.g. vaccines) and education

Level 2

core elements

1. **Antimicrobial – Clinical Pharmacists**
2. Microbiology
3. **Difficult to treat/resistant micro-organisms** (bacterial, fungal, viral, parasitic)
4. Source control
5. **Advanced treatment in the ICU**
6. Nutritional principles
7. **Miscellaneous**
8. Biomarkers and clinical scores, *Imaging in complex cases*
9. Fever in the ICU
10. **Specific entities and challenges related to climate change**
11. Care of the infection patient – Principles - **NAHP**
12. Tracheostomy and rehabilitation

Modular

(based on participant's selection with a minimum number of credits)

Prerequisites

- Level 1 completion

OR

- Pre-test (TBC)
- Previous experience:
 - o You are a clinician, researcher or healthcare worker with at least 2 years of clinical experience in intensive care with septic patients

Minimum content to be completed

- Sepsis and Severe Infections eCourse
- 4 Modules (2 **big** and 2 small)

Possibility to Refresh Level 1

Add relevant sessions at LIVES and Live Webinars –
Link to the congress programme
(Level 3 mandatory?)

Speak to EDIC committee about discarded MCQ?

+ use existing MCQ from quizzes

Level 3

core elements

- Special populations (*immunosuppressed, elderly, postoperative, children, pregnancy, trauma*) – *real-life*
- Global Sepsis problems
- Techniques at microbiology lab (i.e.: type of tests)
- Sepsis Stewardship programmes at hospital-level
- Individualised care
- Pharmacy – **Clinical pharmacists**
- Future

Research project

- How can we assess the evidence?
- Guideline development
- Multicentre studies
- Data analytics, algorithms, use of administrative data
- Immune response
- Innovation

Modular

- Virtual Hybrid Case-based :
 - Interactive teaching refresher
 - Case (core themes to be covered by experts)
 - A total of 5/6 cases
 - Some prepared in advance
 - Specific topics
 - Some real-life (spontaneous)
 - Come topics will be covered regardless of the case (i.e.: drug dosing)
- Pre-congress course face-to-face (similar to the AMS pathway)
 - VRE or case-based
 - Work in small groups
 - Not compulsory

Fellowships (similar to AMS pathway)

- Bedside teaching/rounds
- Microbiology lab
- Pharmacy



Ongoing Studies:

- 8. AB-ICU Study update (Fredrik Sjöval)
- 9. EMPRESS Study (Fredrik Sjöval)
- 10. Daliz Report update (Claire Roger)

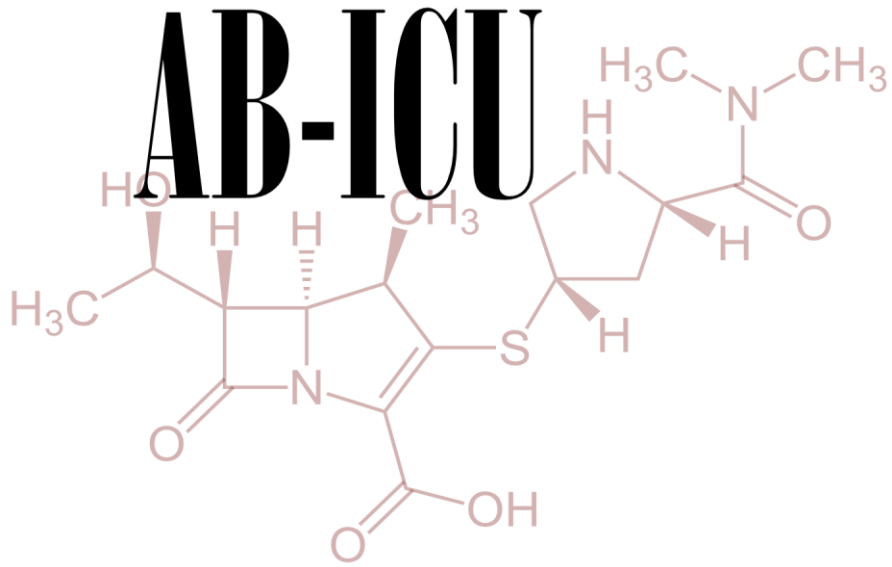


AB-ICU (Fredrik Sjövall)



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Observational study of antibiotic use in ICUs

- Europe and other countries.

2018 - 2022

Antibiotic use in European ICUs (and Australia)

AB-ICU - Participating countries



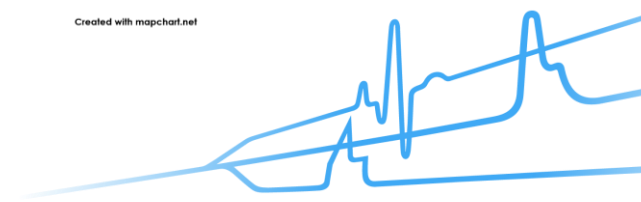
123 units

Contact: fredrik.sjovall@med.lu.se



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Created with mapchart.net





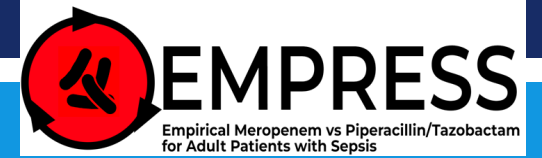
BLING III



EMPRESS

Empirical Meropenem vs Piperacillin/Tazobactam
for Adult Patients with Sepsis

Trial objectives



The objective of the Empirical Meropenem vs. Piperacillin/Tazobactam for Adult Patients with Sepsis (EMPRESS) trial is to assess the effects of empirical meropenem versus piperacillin/tazobactam on mortality and other patient-important outcomes in critically ill adults with sepsis.

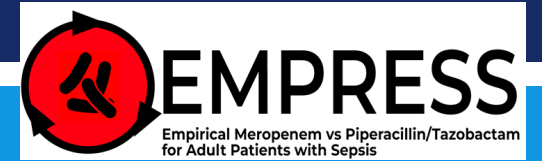
We hypothesise that meropenem will lower mortality compared to piperacillin/tazobactam without any substantial effects on adverse outcomes.



The EMPRESS trial is an investigator-initiated, international, parallel-group, randomised, open-label, adaptive clinical trial with an integrated feasibility phase.



Design



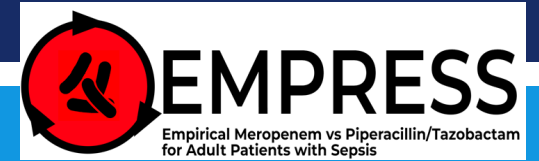
EMPRESS is a stand-alone clinical trial that is partially based on the methodology and core protocol of the adaptive platform trial INCEPT (the Intensive Care Platform Trial, www.incept.dk sharing parts of the methodological framework and infrastructure developed for INCEPT and conducted within the Collaboration for Research in Intensive Care (CRIC, www.cric.nu)



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Inclusion criteria



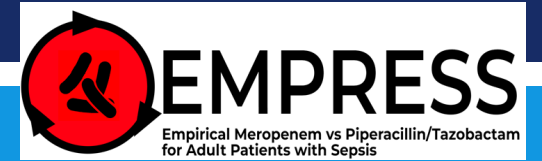
- **Age ≥ 18 years**
- **Sepsis (including septic shock) defined according to the Sepsis-3 criteria [1], i.e., suspected or documented infection and an acute increase of ≥ 2 points in the Sequential Organ Failure Assessment (SOFA) score (a marker of acute organ dysfunction)**
- **Critical illness defined as use of at least one of the following:**
 - a. Invasive mechanical ventilation
 - b. Non-invasive ventilation
 - c. Continuous use of continuous positive airway pressure (CPAP) for hypoxia
 - d. Oxygen supplementation with an oxygen flow of ≥ 10 litres (L)/minute independent of delivery system and total flows
 - e. Continuous infusion of any vasopressor or inotrope (excluding strictly procedure-related infusions)



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• **Clinical indication for empirical treatment with either meropenem or**

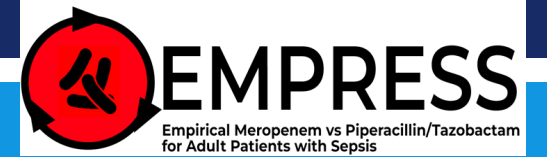
Exclusion criteria



- **Preceding intravenous treatment with meropenem or piperacillin/tazobactam for > 24 hours prior to screening**
- **Known pregnancy**
- **Known hypersensitivity or allergy to beta-lactam antibiotics**
- **Suspected or documented central nervous system infection**



Contact



- empress@cric.nu
- fredrik.sjovall@med.lu.se



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DALI2 Study (Claire Roger)



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THE UNIVERSITY
OF QUEENSLAND
AUSTRALIA

CREATE CHANGE

DALI-2

Defining Antibiotic Levels in Intensive care unit patients



THE UNIVERSITY
OF QUEENSLAND
AUSTRALIA

UQCCR
UQ Centre for Clinical Research



THE UNIVERSITY
OF QUEENSLAND
AUSTRALIA

CREATE CHANGE



CRERESPOND

CENTRE OF RESEARCH EXCELLENCE
Optimising and personalising antimicrobial dosing to reduce resistance

- 2011 point prevalence study
- **>450** patients across 68 European ICUs
- **Numerous publications, > 1000 citations**
- **Key findings/impacts:**
 - Conventional antimicrobial dosing strategies frequently resulted in low antimicrobial exposures
 - resulting in a 32% lower likelihood of a positive clinical outcome
 - DALI ignited a global push towards optimised antimicrobial dosing, reshaping major clinical guidelines
 - DALI a catalyst for a host of clinical trials including the BLING program

- **Study Gaps:**
- **no paediatric data, only 1 week of data collection, smaller selection of antimicrobials, Euro-centric, limited micro data (including MIC data)**
- **Knowledge gaps:**
- **TDM use in has increased ~ 7-fold over the last 10-years**
- **Newer agents with limited data**
- **Remains unclear whether newer dosing advances have changed the risk factors for infection-related clinical failure**

- **Design: Prospective, multi-national, pharmacokinetic/pharmacodynamic (PK/PD) cohort study**
- **Objective 1:**
- **Quantify the prevalence of antimicrobial exposure categories (insufficient, optimal and toxic) by antimicrobial agent and class in a large cohort of critically ill patients with infection.**
 - Over 30 antibiotics included

- **Other Objectives include:**
- **Identify factors associated with optimal antimicrobial exposure, as well as risk factors for non-optimal antimicrobial exposure (insufficient or toxic), by antimicrobial agent and class.**
- **Evaluate the relationship between antimicrobial exposure categories, associated risk factors, and clinical outcomes, including clinical cure, survival (mortality at days 14 and 30), ICU-free days up to day 30, and the emergence of antimicrobial resistance by day 14.**
-

- **Study Procedure:**
- **Study enrolment will occur over a ~ 3-month period per site, with proposed commencement late-2025 and completion by the end of 2027.**
- **Blood samples will be taken during one dosing interval for each study antibiotic.**
- **Each site is expected to recruit between 10 to 30 participants.**
- **Depending on the antibiotic, only two to three blood samples are required per participant (between 24 and 96 hours)**
-

- **Protocol complete**
- **Australian Ethics Approval (HREC/2024/QCHQ/111399)**
- **Registered Trial through ANCTR (ACTRN12625000544471)**
- **ANZICS Paediatric Study Group endorsed**
- **Australian governance and contracts in progress (12 ICUs submitted)**
- **UK – charitable funding secured to support recruitment of 300 participants in 10 ICUs**
 - UK Ethics submission next month

- **CTIS approval part I obtained for Europe, part II approved for France with recruitment planned to start end 2025, part II approval for other European countries to be submitted – remote monitoring approved**
- **National Coordinators ~ 40 Countries, 6 continents**
- **Expect to recruit at least 1250 participants from > 70 sites**

- **Funding :**
 - No major funding currently
 - East ASIA grant pending
 - NHMRC Clinical Trial and Cohort Study grant application due 5/11/25
 - DALI-2 UK has charity
 - DALI-2 France/ Sweden/ Greece have their own funding/in kind support
 - Spain will act as European hub for bioanalysis
 - Further funding to be explored and will make available if successful
 - Request local sites and national coordinators to do the same
 - UQ to pay for shipping costs and all associated assay and analyse costs

- **Timeline :**
- **Continue to seek funding**
- **Ethics, governance and contracts over the next year**
- **Site initiation and training over staggered from late 2025**
- **Plan to commence recruitment from late 2025/early 2026 - staggered over 2 years.**

Key contacts:

European Lead: Claire Roger claire.roger@chu-nimes.fr

Chief Investigator: Jason Roberts j.roberts@uq.edu.au

Project Manager: Paul Williams p.g.williams@uq.edu.au

How to get our section more diverse/younger...



1623 Voting members!

no knowledge about age of members and gender diversity due to data protection...



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Online medialog

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ICM Journals

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Find your peers and start networking.*

What is NEXT



Contact the Committee

The NEXT Committee is always available to answer any question you might have, do not hesitate to contact us!

[Here](#) you can find information about the NEXT

Looking for accommodation at LIVES 2023?



Emilio Rodriguez-Ruiz
ESICM NEXT Chair
Gaetano Scaramuzzo, Italy
Chair elect

(Official) Handover to new chair Gennaro de Pascale



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