

HSRO meeting. ESICM Office. 19 March 2019.

Participants:
Dylan De Lange
Michelle Chew
Hans Flaatten
Paul Zajic
Andy Rhodes
Silvia Calvino
Rui Moreno
Andrea Rossi
Antonio Artigas

- 1. Dylan welcomed all participants
- 2. All participants introduced themselves
- 3. Minutes of last meeting accepted
- 4. Congress matters
 - a. Dylan explained ESICM's intention to integrate topics across sections
 - b. New this year: 'Meet your idol' breakfast sessions
 - c. 'Meet the author'
 - d. Less room for precongress courses (space limitations). However, the HSRO section will run with a hands on masterclass focusing on hands on sessions for the Berlin meeting. Invitations to speakers to be sent within the next few days.

5. Research committees

a. VIP2. Hans Flaatten presented an update. VIP1 approaching 10 publications, including national substudies, showing the enormous potential of this type of research. Recruitment 2900 patients to date, goal 3000. Focus on acute admissions only. We discussed the difficulties associated with GDPR and the need for data sharing agreements. Hans presented recruitment statistics. Approximately half of centres are 'low recruiters' and we discussed how these would be handled in the final analysis (eg.excluding centres with <5 patients or doing sensitivity analyses). Start of data analysis planned June 1, with a planned submission in mid-August in time for Lives 2019. VIP3 study also planned, funding sought from ESICM. Christian Jung is looking for centres willing to participate in a preplanned substudy investigating the microcirculation in very old patients with septic shock. Dylan to circulate study protocol.</p>



The Intensive Connection

- b. QoR15. Michelle reported that both Delphi rounds have been completed. After the 1st Delphi round it became apparent that the questionnaire could not be used for both screening and follow up. The executive committee of QoR15 have therefore decided to only develop a screening tool, to be administered at approx. 6 weeks post ICU discharge. Andy Rhodes suggested that this should be applied immediately post discharge in order to capture early changes and identify treatment need. Pilot instrument will be tested in Sweden.
- c. SANDMAN. Michelle Chew presented an update on the study. The metafile is now complete. Largest changes since last update at ESICM Lives 2018: 1) retrospective study design 2)addition of aetiology specific data (focus on sepsis, neurological ICU and burns), 3)new statistical analysis plan (statistician now affiliated with project). Calls for expression of interest to be circulated via HRSO.
- d. SAPS3D. Paul Zajic presented this predictive tool for readmissions to ICU within 48h, and mortality within the same hospital stay. The ultimate goal is to create a tool to scrutinize discharge practices. Planned sample size approx. 20,000 patients across 300 ICUs. Funding sought from ESICM and Austrian agencies. We discussed choice of database, and funding options.
- e. Toxic-EU presented by Dylan. Intoxicated adult patients only, datafile based on that from VIP study. Dylan described challenge of capturing the different admission toxicologies and drugs. eCRF in progress. Recruitment of National Coordinators after summer.

6. Working groups

- a. Health Economics, nothing new
- b. Outcomes nothing new, SAPS 3D
- c. Quality and Safety, minor progress. Se separate WG minutes (meeting today 1530)
- d. DELTO, nothing new.

7. PACT courses/E-learning modules

- a. Org and management done
- b. Outcome too large. E-course group re-evaluating, currently being edited/reviewed
- c. Long term outcomes after surgery done, currently being reviewed
- d. Quality assurance and cost-effectiveness no progress reported
- e. Elderly surgical patients suggested at last meeting, proposed to change toi 'elderly patient'

8. Other issues

- a. Michelle asked group to consider retrospectively endorsement for MINSS study. Michelle to submit summary sheet to HSRO.
- b. Michelle's term as deputy chair finishes at ESICM 2019, expressions of interest invited. Paul Zajic has put his hand up.
- c. Antonio raised new study of postICU follow up. Will circulate study summary.