The ESICM Annual Report describes ESICM activities from October 2017 to October 2018. Only the Treasurer’s Report refers to the fiscal year from 1st January 2017-2018.
Dear Colleagues

The timing of our annual congress, which this year falls at the end of October, is a suitable period in the calendar to look back on the numerous achievements and developments of our Society over the last twelve months in relation to our profession and our membership.

We are this month very pleased to announce the launch of the Society’s new Fund ALIVE, which has been created under the auspices of the King Baudouin Foundation, an independent and pluralistic foundation working in Belgium and at European and international level, which seeks to change society for the better and invests in inspiring projects and individuals, including poverty, philanthropy, health, development, democracy and sustainable development. In close cooperation with our Global Intensive Care Working Group and the World Health Organisation, the ESICM Foundation aims to support and deliver specialised education and training for intensivists in countries of low and middle income. We will be bringing you more news and information about these exciting projects shortly.

Pluralism and the recognition of equality and diversity is of key importance to our Society and this year ESICM actively affirmed its commitment to the coexistence of different convictions, interests and cultural diversity within the profession. These should also be integrated and embedded in our education and clinical research and, for this purpose, a Diversity Task Force and three Working Groups have been set up. The groups will be meeting during LIVES to address the role of Gender, Race, Culture and Socio Economic Status and Multi-Personalism and the Task Force will be working towards producing a manifesto with practical and scientific solutions. This will guide the Society towards a formal publication of its policy and Code of Conduct on these important issues affecting our society as well as our workplace.

Another subject of widespread importance is the storage and handling of personal data. The EU General Data Protection Regulation 2016/679/EU for the protection of personal data, which focuses on accountability, transparency, protection and reliability for the protection of personal data, became law in May 2018. ESICM is fully compliant and has an internal (DRP) project manager, ensuring that any third party that it is working with is also operating lawfully.

Elections took place this year for positions in our various Committees, Sections, Working Groups and Council. We would like to congratulate all those taking up their elected positions and to express our grateful thanks to all those who stepped down this year. Supporting our incoming President, Jozef Kesecioglu, will be the newly elected officers: Maurizio Cecconi (It), in his role of President elect; Jean Louis Teboul (F) as Treasurer; Lui Forni (UK) as General Secretary; Armand Girbes (NL) as Chair of the Working Groups and Council; and Jan De Waal (Belgium) as Chair of the Research Committee.

Changes are also in store for the Society’s official journal, ICU, as Elie Aounzay will set down his pen after five years of dynamic leadership and extraordinary energy and dedication, to clear the way for incoming Editor-in-Chief, Giuseppe Citerio, who is no stranger to the journal’s editorial team. This is a exciting time for him to take over as the journal goes from strength to strength. The new impact factor announced last month of 13.057 places it as number one journal exclusively focused on critical care and 3rd out of 40 journals in the critical care category.

Our congratulations and thanks go to all the editors and reviewers for their tireless support, the authors for their crucial scientific contributions and to the readers who cite the journal.

Peristent and reaching information is of paramount importance in this age of digital media and the Society’s new look website is currently attracting 27,000 users worldwide per month, hungry for information and knowledge. New content and language options are now available on ASPET, the app that provides a handy bedside tool and visual reference for nurses and physicians alike.

This year’s congress, LIVES2018, has received a record number of abstracts (1,600) and the number of applicants for the Research Awards has climbed by 30%. The range and funding of our awards has been enlarged, with an enticing €355,000 now available to researchers.

Next year is an award for projects that cover family’s needs and expectations and the Global Intensive Care Award for research conducted in a low and middle-income country with an educational element focusing on improving patient care. The Society’s collaborative work has made significant progress and this year a Consensus Committee of 16 international experts representing the European Society of Intensive Care Medicine and the Society of Critical Care Medicine was convened at the annual meetings of both societies to identify research priorities in the management, epidemiology, outcome and underlying causes of sepsis and septic shock. The entire committee interactively developed the document and recommendations which were published in IC&M and CCM simultaneously.

The ESICM President also represented the Society at the WHO Sepsis Technical Expert Meeting in Geneva, Switzerland, on 16-17 January 2018.

Along with our Brazilian partner, the national Brazilian association of intensive care medicine (AMIB), European experts from the Society have again collaborated on the joint hemodynamic and mechanical ventilation course. Our strong working relationships with our colleagues in Asia go from strength to strength and next year Taiwan will be the location for what is now our third Euro Asia Conference in April 2019. We would like to thank the Taiwan National Society of Critical Care Medicine for its supporting role and the warm welcome that awaits us.

The Society’s purpose built training centre in Brussels is increasingly used for our masterclasses and meetings and recently the EDIC exams. The capital city represents an obvious option for learning and development with its easy access. Our new portfolio of training programmes includes the essential skills and topics of Infections and Sepsis, Respiratory Monitoring and Mechanical Ventilation, Life Threatening Emergencies, Trauma, and End of Life Care. The results of our recent educational needs assessment show that there are indeed the practical courses that intensivists are actively looking for, and we will provide attendees the opportunity to attend some of the programmes that have a complimentary focus back to back, during the same week.

The concept of individualised educational pathways for physicians, trainees, senior specialists, nurses and allied healthcare professionals was launched this year. This represents an integrated, horizontal approach to learning that connects our webinars, eLearning modules, masterclasses, congress sessions and NEXT Fellowships, allowing people to personalise their continuing medical education in a progressive way. The first pathway to be offered will focus on a key area of intensive care, infections. Pathways for several other topics are currently being developed.

Another brand new service, ICabed4U, provides free accommodation for N&AHP and NEXT members during the annual congress when they become guests of fellow intensivists. As well as saving money, this innovative dedicated Facebook platform for our members can enlarge personal networks and contacts.

Attractive savings can be made by nurses and allied health professionals this year, as the N&AHP membership fee has recently been reduced to €60 EUR to encourage more individuals to benefit from the many opportunities we provide.

We represent a unique global community of 9,000 intensivists, and our hope is that you are making the most out of your membership and will read with interest the following reports presented by our incredibly hard working sections and committees that are the driving force of our educational and research projects and programmes.

Finally, this foreword does not provide sufficient space for us to thank everyone who has given their time, expertise and energy to the Society, so we will thank all those persons collectively, but sincerely. On a more personal note, I can say that if I has been an honour for me to represent this Society as its President for the last two years and I know that Jozef, who takes my place will bring his strong, competent and straightforward leadership, that his colleagues and peers will all recognise from his work place, to our Society.

Warm regards

Massimo Antonelli
Jozef Kesecioglu

ESICM President
ESICM President-Elect

“As intensivists we need to stand united to face the new challenges of this era”.

ESICM ANNUAL REPORT 2017-2018

Introduction by the President & President-Elect
1. Who we are
The European Society of Intensive Care Medicine is an association of individual persons and the voice of intensivists across Europe.

The Society was founded in March 1982 in Geneva, Switzerland and is a non-profit international association. ESICM has over 9,000 members worldwide, spanning 121 countries and comprising a diverse group of highly-trained professionals who provide care in specialised care units and work towards the best outcome possible for seriously ill patients.

Objectives_
ESICM supports and promotes the advancement of knowledge in intensive care medicine, in particular the promotion of the highest standards of multidisciplinary care of critically ill patients and their families through education, research and professional development.

Aims and Missions_
- To promote and coordinate activities in the different fields of intensive care medicine
- To foster research and education in these fields
- To provide recommendations for optimising facilities for intensive care medicine in Europe
- To organise and coordinate international congresses and meetings

Our Pledge_
We are continuing to grow and strengthen and provide our members with more and more opportunities to learn, participate in research programmes and clinical trials and to mobilise.

ESICM elects new leadership_
All officers of the ESICM, regardless of their position, provide their effort and time on a completely voluntary basis. Elections took place in 2018 for the following positions. We welcome all those elected and look forward to working with them to advance the effectiveness of our Society.

Executive Committee
President Elect: Maurizio CECCONI (Italy)
Secretary: Lui FORNI (UK)
Treasurer: Jean-Louis TEBOUL (France)

Congress Committee
Chairperson ARF: Jorge MANCEBO (Spain)
Chairperson INF: Pedro POVOA (Portugal)
Chairperson MEN: Mette BERGER (Switzerland)
Chairperson SIS: Ricard FERRER ROCA (Spain)

Research Committee
Deputy Chair INF: Andrew CONWAY (United Kingdom)

National Representatives - Countries
Belgium: Patrick BISTON
Germany: Roland FRANCIS
Greece: Vasileios BEKOS
Israel: Peter VAN HEERDEN
Norway: Nicholas BARLOW
Portugal: Sofia ESCORCIO
Spain: José A LORENTE
Turkey: Tughan UTKU
United Kingdom: Julia A WENDON

National Representatives - Regions
Asia Pacific: Tapas Sahoo
Central & South America: Flavio E. NACUL
Examinations Committee
Janne LISANANTTI (Finland)
Clinical Training Committee
Dolores MATEO (United Kingdom)
Stephen SHEPHERD (United Kingdom)
NEXT Committee
Silva DE ROSA (Italy)
Laura GALARZA (Spain)
Massimiliano GRECO (Italy)
Beatriz LOBO VALBUENA (Spain)
Maria VARGAS (Italy)
2. Organisational Structure

ESICM has a reciprocal arrangement for dual membership with 67 national societies.

National Societies

- AAI: Association of Anaesthesiologists-Intensivists (Russia)
- ACCM: Association of Critical Care and Catastrophe Medicine of Georgia
- AMCI: Asociación Colombiana de Medicina Crítica y Cuidado Intensivo
- AMIB: Associação de Medicina Intensiva Brasileira
- ANZICS: Australian and New Zealand Intensive Care Society
- APMTI: Asociación Panamericana de Medicina Crítica y Terapia Intensiva
- BSA: Bulgarian Society of Anaesthesiology
- CCCS: Canadian Critical Care Society
- COCECATI: Consorcio Centroamericano y del Caribe de Terapia Intensiva
- DIVI: Deutsche Interdisziplinäre Vereinigung für Intensiv- und Notfallmedizin
- DGAI: Deutsche Gesellschaft für Anästhesiologie und Intensivmedizin
- DGIM: Deutsche Gesellschaft für Innere Medizin
- EACC: Emirates Intensive Care Society
- ESA: Estonian Society of Anaesthesiologists
- ESC: European Society of Critical Care Medicine
- ESCCM: European Society of Critical Care Medicine
- ESCME: European Society of Critical Care Medicine and Emergency Medicine
- FSI: Finnish Society of Intensive Care
- GSACCM: Georgian Society of Anaesthesiology & Critical Care Medicine
- HSIC: Hellenic Society of Intensive Care
- IC: Intensive Care Society
- ICRI: Irish Society of Intensive Care Medicine
- ISAICM: Icelandic Society of Anesthesia & Intensive Care Medicine
- ISCCM: Indian Society of Critical Care Medicine
- ISCCM: Israeli Society of Critical Care Medicine
- JSICM: Japanese Society of Intensive Care Medicine
- KSCCM: Korean Society of Critical Care Medicine
- LCCS: Lebanese Critical Care Society
- LSAICM: Lithuanian Society of Anesthesiology & Intensive Care Medicine
- MAITI: Hungarian Society of Anaesthesiology & Intensive Care Therapy
- MSA: Macedonian Society of Anesthesia
- MSA: Macedonian Society of Anesthesiology & Intensive Care Medicine
- NAF: Norwegian Society of Anaesthesiology
- NCG: Neurocritical Care Society
- NVA: Nederlandse Vereniging voor Anesthesiologie
- NYIC: Nederlandse Vereniging voor Intensieve Zorg en Notaallozorg
- OEGAI: Österreichische Gesellschaft für Anästhesiologie, Reanimation und Intensivmedizin
- OEGAIM: Austrian Society of Medical and General Intensive Care Medicine
- PTAIPT: Polish Society of Anaesthesia & Intensive Therapy
- SAA: Swedish Association of Anaesthesiologists & Intensivists
- SARMS: Society of Anaesthesia & Reanimatology of the Republic of Moldova
- SATI: Sociedad Argentina de Terapia Intensiva
- SCCS: The Saudi Critical Care Society
- SSCS: Schweizerische Gesellschaft für Intensivmedizin und Notfallmedizin
- SSICM: Serbian Society of Intensive Care Medicine
- SSIIM: Slovenian Society of Intensive Medicine
- SOCR: Swiss Society of Critical Care Medicine
- TAMD: Tunisian Society of Intensive Care Medicine
- TSIM: Turkish Society of Medical and Surgical Intensive Care Medicine
- VNACCEMT: Vietnam Association of Emergency Critical Care Medicine and Medical Toxicology

Council

The Council is the governing body and assigns the Executive Committee, comprising the President, President Elect, Secretary General and Treasurer, with the daily management of the organisation. The operating body is formed by the different committees and sections that enabled volunteers to play an active role in shaping current and future ESICM initiatives. Each section is assigned a set of responsibilities and tasks associated with the different activities of the ESICM and the reports from the Chairpersons of the different sections can be found in Chapters III & IV.
Report by Armand Girbes, General Secretary and Joël Alexandre, Chief Executive Officer

As my three-year mandate as General Secretary comes to an end, I have every confidence that my successor, Lui Forni, will take over a strong and confident Society, one that is growing steadily, putting science and education in the forefront and is resolved to become an inclusive and open organisation, reflecting critical care practice today.

We are a representative body of individuals and must reflect our member base and workforce in ICUs. It is useful to underline that our working groups and committees are open to all professionals, regardless of gender, sexuality and gender identity, race and ethnicity. We must, however, also acknowledge that some (more or less hidden) barriers may play a role in an equal, fair and justified access to all the opportunities of our Society.

The newly formed Diversity Task Force, capably chaired by NEXT President, Björn Weiss, has been split into three working groups made up of geographically and ethnically diverse members, with ad hoc guidance from a sociologist expert from Drexel University, USA.

We are convinced that the groups’ enthusiasm and commitment is tangible and will be a real asset to the Society and all our members.

The 2018 elections have brought new faces and talent to the composition of the Society. We are truly grateful to all those individuals who have stood for election this year, to those who will now assume new positions, and those who are stepping down after their terms of office are completed.

The 2018 elections have brought new faces and talent to the composition of the Society. We are truly grateful to all those individuals who have stood for election this year, to those who will now assume new positions, and those who are stepping down after their terms of office are completed. This year we are actively pursuing more nurses and allied health professionals to join our worldwide network and have revised the N&AHP fee to offer a very attractive and affordable incentive. The series of N&AHP specific webinars attracted a significant number to our eLearning platform. This, combined with help with writing abstracts and scientific articles, the practical and multilingual Smartphone app and nurse-led research studies, adds significant value and importance to this membership category.

Learning pathways is a new education tool that we are most proud to commend. Members now have the opportunity to create and build a personalised learning pathway, according to topics of interest, by participating in webinars, masterclasses, congress sessions, fellowships and eLearning modules. With all the benefits of personal tutoring and certified by ESICM, these can be validated at national level. The first pathway focuses on infections and other topics will be offered later on.

Our Society is an undeniably global success and today 9,000 members strong. We are able to reach out to more and more intensivists by means of our webinars, eLearning, global research and newsletters, and the Society is all the more rich for this international presence. EuroAsia will next year move from Hong Kong to Taiwan in an attempt to make contact with even more ICU professionals outside of Europe. The purpose of our new Foundation, ALIVE, with the help of the Global Intensive Care Working Group, is to deliver practical and sustainable intensive care training and skills to intensivists in countries of low and middle income.

Whatever your motivation to be part of our unique network, we wish you a full and rewarding experience.

Armand Girbes
ESICM General Secretary
Joël Alexandre
ESICM Chief Executive Officer
3. Membership
A constantly growing network of members

Our 9,000 global community of intensivists and allied health practitioners all benefit from the numerous advantages ESICM membership offers:

- Reduced fees for ESICM, workshops and the EDIC and EDEC diplomas
- Discounts for participation at our annual congress
- Free access to eLives webcasts (lectures from the scientific sessions held during ESICM congresses and meetings)
- Annual subscription to the Society’s, ICM journal, the first journal publishing only critical care (with an impact factor of 15.008)
- 500€ discount on article processing charges for our second, open-access journal, ICMx (experimental research)
- The possibility to apply for Research grants and awards
- Regular live, interactive webinars with UEMS accreditation

As well as these very practical benefits, members can also get involved by joining specialist groups and sections, fellowships and mentoring, and strengthen the network of intensivists in Europe and beyond.

Lastly, if your national society is not yet affiliated to our Society, do not hesitate to contact our Membership Department at: members@esicm.org

Here are 13 other good reasons to become an ESICM member:

1. Discounts for congress participation
2. Free access to e-LIVES Webcasts
3. Annual subscription to ICM journal
4. 500€ discount on article processing charges for ICMx
5. Apply for research grants
6. Free access to e-Modules (Former PACT Programme)
7. Reduced fees for ESICM Master Classes
8. Reduced fees for EDIC and EDEC
9. Participation in ESICM’s scientific activities
10. Full access to our interactive website
11. Dual membership
12. Webinars led by top experts
ACTIVITIES OF THE ESICM: DIVISION OF SCIENTIFIC AFFAIRS
Activities of the ESICM: Division Of Scientific Affairs

The last 12 months have seen a series of important activities in the Society. We have carried on growing them in Europe and outside. LIVES 2017 was a wonderful conference, but was just the start of a very active year for our Division.

Between April and May, we had two very successful meetings, the second ESICM EuroAsia in Hong Kong and our first LIVESForum (the new format of the former Regional Conference) in Madrid.

EuroAsia 2018 was a meeting organised in collaboration with our partners, several of the Asian Societies of Intensive Care Medicine. The meeting saw more than 500 delegates attending. The overall feedback has been excellent and we will be back in Asia in 2019. The location for the next EuroAsia 2019 is Taipei.

LivesForum Madrid “Monitoring Acute Respiratory Failure” was a very successful meeting too, with 400 delegates interacting in plenary lectures and workshops with the foremost worldwide experts in the field. Next year, LIVESForum goes to Nice in France for a focus on “AKI as a syndrome”.

And, finally, here we are in Paris, for LIVES 2018. More than 300 international speakers will be joining the congress this year. A testimony to how important LIVES has become as a scientific forum are the 1600 abstracts submitted. This is the highest ever number. This will be matched by the release of high impact factor papers simultaneously to their presentation in the Presidents’ Ground Breaking Research Release, The Clinical Trials and the Hot Topic Sessions.

The congress will be even more diverse than before, with a growing number of female and young speakers, an increased Social Media Presence, a bigger Simulation Centre, the lively and stimulating NEXT Lounge, as well as hundreds of talks to listen to. In Paris we have a new area, The Arena, where some of the best abstracts will be presented. Every day, in the same area, a different worldwide expert will hold one of the new “Unplugged Sessions”, completely without slides or technical aids, apart from a microphone and with the help of a Chair.

Two amazing guest speakers will open the Congress this year: Laurence Devilliers and Francesca Gino from the Harvard Business School. The Simulation Centre will be busier than ever with several hands-on sessions.

The success of the Tech Lounge convinced us to repeat the experience in Paris this year and we are now working on our first Big Data meeting & Datathon in Milan next February.

I feel very privileged having served the Society as Chair of the Division of Scientific Affairs. It has been the most rewarding academic activity I have had the honor to undertake in my career. I believe we have grown the scientific activities of the Society and reached new standards together. All of this is possible only thanks to the relentless work of the people in our Brussels office and to a wonderful Congress Committee. I will miss all of this and I wish the incoming Chair, Armand Girbes, the very best of luck. I am sure he will bring his energy and wisdom to improve things even more.

Maurizio CECCONI
ESICM Chair of the Division of Scientific Affairs
Chair of the Congress Committee
Scientific Affairs
1. ESICM Annual Congress and LIVES Forum

- Delegates 5671
- Abstracts submitted 1179
- Abstracts presented 1058
- Abstracts oral pres 147
- Abstract poster pres 911
- Abstracts rejected 7.8%
- Next Lounge Sessions 20
- 16 Interactive Debates
- Simulation Centre
- 12 PG Courses
- EDEC Diploma
- EDIC Part 2
- Session Rooms 10
- Poster Corners 8
- Thematic sessions 66
- Clinical sessions 20
- ESICM speakers 321
- Industry speakers 36
- Major Sponsor 18
- Exhibiting companies 74
- Industry sessions 21
- Sqm exhibition 1495

What our delegates liked best at LIVES 2017:

Really terrific congress, one of the two best ICU meetings in the world.

Friendly atmosphere in spite of the enormous number of presentations and visitors.

Thanks to all the organisers.

High quality programme and speakers and excellent overall organisation.

Excellent congress, well organised.

A lot of sections, good info, up to date lectures.

Congratulations to ESICM
How satisfied are you with LIVES 2017 in general?

- Excellent: 49%
- Good: 43%
- Satisfactory: 7%
- Poor: 0%

10 top submitting countries

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<tr>
<th>Country</th>
<th>No. of submitted Abstracts</th>
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<tr>
<td>Spain</td>
<td>193</td>
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<tr>
<td>United Kingdom</td>
<td>139</td>
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<tr>
<td>France</td>
<td>69</td>
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<td>Netherlands</td>
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<td>Italy</td>
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<td>Japan</td>
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<td>Korea, Republic of</td>
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<td>Tunisia</td>
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<td>Germany</td>
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<td>Brasil</td>
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2. ESICM Research

Report of the Research Committee

Research is more than ever a pillar of ESICM. The steady growth of research activities is challenging and indicates that the Society is filling a real need. Paving the way for supporting and facilitating research projects to better serve the community and the patients is clearly one of the aims of the Society.

The Research Committee received 8 survey proposals in 2018 and only one was rejected.

Five trials have been endorsed this past year: VIP-2, ENIO, INTUBE, PROTECTION and SQUEEZE.

The INACTIC project by the N&HP Committee has been successful in securing a grant from the Erasmus+ Programme. International Nursing Advanced Competency-based Training for Intensive Care is a core curriculum project on IC.

ESICM Research has continued developing its two libraries. The first initiated by the SRG on systematic reviews and the second on Target Temperature management.

RESEARCH AWARDS

The number of applications rose by one third this year to a record 173. This exceptional figure impacted the review process. In order to cope with this growing number of research projects submitted, the Jury met in two sessions and only those that had passed the scientific quality and budget reviews were sent to external reviewers.

Volunteers who would like to be part of our pool of reviewers and help us assess projects can express their interest at https://www.surveymonkey.com/r/CallForReviewers at any time. The link is open all year long.

We have offered three new awards this year, allocating each €15,000.

- The ESICM Family Partnership Award for projects which cover families’ needs and expectations, care providers & patient interactions, long-term outcomes in ICU survivors. This grant is fully funded by ESICM.
- The ESICM Global ICU Award aims at projects conducted in a Low & Middle Income Country. The projects should have an educational element focusing on improving patient care. The Global ICU Award grant is fully funded by ESICM.
- The Epimed Solutions ESICM Quality Improvement and Patient Safety Award aims at projects focusing on either Quality Improvement, use of quality indicators, predictive models for outcomes assessment of use of big data in patient safety for IVU patient. This award is fully funded by Epimed Solutions.

ESICM TRIALS GROUP

The Clinical Trials Group activities continue to develop very successfully both in terms of ICUs participating in them and in terms of patient accrual.

Several outstanding trials have been incorporated in the ESICM Trials Group in the past 12 months: DecubICUs, Synapse-ICU and ICU-Conservative O2.

The Abses, Apronet, Peace and Supernova trials have successfully closed. Preliminary and final results will be available at LIVES 2018 in Paris

ABSES - (Abdominal Sepsis Study): Epidemiology of Etiology and Outcome is a multinational, prospective, observational study on intra-abdominal infections (IAIs) in critically ill patients with a special emphasis on epidemiology and outcomes. The trial closed in March 2017. More than 2,200 patients have been included. The final results will be shared at the ESICM Trials event at LIVES 2018 in Paris.

APRONET - ARDS and PROne position NETwork is a one-day prevalence study initiated by the ESICM Acute Respiratory Failure (ARF) Section, repeated four times over a one-year period. This is a multicentre observational prospective study with no patient follow-up. The primary objective of this study was to determine the prevalence of the use of the prone position in ARDS. The trial opened in April 2016 and closed in January 2017. 6,608 patients were screened in 138 ICUs from 19 countries. Publication: Claude Guérin et al. A prospective international observational prevalence study on prone positioning of ARDS patients: the APRONET (ARDS: Prone Position Network) study. Intensive Care Med. 2017 Dec 7. doi: 10.1007/s00134-017-4996-5

SUPERNOVA - A pilot study with the aim to assess low-flow extracorporeal CO2 removal in patients with moderate ARDS to enhance lung protective ventilation. Patients were included in three separate arms using either the Alung, Maquet or Novalung device. The pilot and safety study opened at the end of 2015 and closed on 30 June 2017. The final manuscript will be shared at the ESICM Trials Group event at LIVES 2018 in Paris.

TRAIN - TRansfusion strategies in Acute brain Injured patients: it is a prospective multicenter randomized interventional study that aims to assess the impact of two different strategies to administer blood transfusions in a large cohort of critically ill patients with a primary brain injury. Registration is open to sites which have at least 50 patients with acute brain injury admitted per year. During the first 23 months, a total of 2188 patients have been screened in the active centers; 275 patients (13%) have been eventually randomized. The last month, 14 patients have been randomized.

DECUBICUS - A Multicenter International One-Day Prevalence Study on Pressure ulcers in Intensive Care Units. The objective is to provide an up-to-date, international “global” picture of the extent and patterns of pressure ulcers in ICUs. It is the first nursing project accepted as an ESICM Trials Group Study. Any ICU can take part worldwide. The data collection date was set for 15 May 2018. Since then more than 10,000 patients have been enrolled.

PREYAKI - Biomarker Guided Implementation of the KDIGO Guidelines to reduce the occurrence of AKI in patients after cardiac surgery. A selection of ICUs in Europe is participating. This project received the ESICM Trials Group Award 2017. To date, 11 centres have been given clearance to access the eCRF platform.
VITALIZE - Effect of high-dose vitamin D3 on 28-day mortality in adult critically ill patients with severe vitamin D deficiency. eCRF development is nearing completion. The recruitment of patients within a selection of European sites started in August 2017. VITALIZE has recruited 95 patients so far in 7 Austrian ICUs. 5 more are ready to include patients. Recruitment is currently seasonal (and expectedly) slow. There is a Belgian EC approval, Germany is waiting for final funding approval, and the UK has submitted the first step for funding.

SYNAPSE-ICU - An international prospective observational Study on Intracranial Pressure in intensive care (ICU). The objectives of the study are to explore ICP monitoring variation in practice in order to prioritise uncertainties in the clinical management of critical care patients with acute brain injury and support further collaborative hypotheses based on prospective studies. To date, more than 1,000 cases have been included in the eCRF platform.

TARGET TEMPERATURE MANAGEMENT
Although Target Temperature Management (TTM) has potential applications in various ICU settings, there is no internationally-agreed protocol on its use. This library - supported by BARD - aims to share information about the current use of TTM by providing open-access to protocols submitted by ICUs from around the world.

WEAN SAFE - WorldwiDE AssessmeNt of Separation of pAtients from ventilatory assistance is a multi-centre, prospective, observational, 4-week inception cohort study, initiated by the ESICM Acute Respiratory Failure (ARF) Section. The purpose of this study is to describe, in a large population of ICU patients, the burden of, management and spectrum of approaches to weaning from ventilation, in patients that require invasive mechanical ventilation for any reason, for a time period of at least 24 hours. To date, data from approximately 10,000 cases from all over the world have already been validated in the eCRF platform.

ICU-CONSERVATIVE O2 - The purpose of the present study is to assess whether, in a wide population of mechanically critically ill patients, the strict maintenance of a state of normoxia, by application of a defined protocol, could be beneficial in terms of ICU mortality, incidence of organ failure and new outbreaks of infections, if compared to the application of more liberal strategies of oxygen administration. The eCRF platform is planned to open early December 2018 for a selection of ICU from Italy, France, the United Kingdom and Spain.

SYSTEMATIC REVIEW GROUP (SRG)
The SRG contributes to the Society’s educational and professional development activities, focusing on literature interpretation and how to perform high quality systematic reviews. The SRG library is an online resource platform containing high quality, up-to-date systematic reviews on summaries of the literature.

Under the leadership of Marius Terblanche, the SRG aims to help the Society’s members make informed choices for the benefit of their patients, by providing access to these summaries and to fill knowledge gaps by commissioning high-quality systematic reviews.

More than 100 reviews are indexed and new ones are commissioned. At the same time, the SRG contributes to a project on Palliative Care Interventions in Intensive Care Unit patients, a systematic review and outlook for development, led by the Ethics Section. Sharon Einav is the new Chairperson of the SRG.

PUBLICATIONS
Although Target Temperature Management (TTM) has Two statements from the European Commission have been endorsed by ESICM: One European call for action by ESICM-ESCMID and WAAR on Antimicrobial Resistance (AMR). ESICM is involved in the EU AMR working group and in EU Sepsis Group task force. It is a way for ESICM to be associated with other stakeholders right from the beginning of the EU policy work. We believe it is important for ESICM to be visible and we think that by signing these statements, it will give more credibility to ESICM when we apply for European grants and when we are involved with other EU groups and take part in EU meetings. Moreover, the European Public Health Alliance shared the Position Statement from ESICM/ESCMID/WAAR Round Table on multi-drug resistance on its own website.

Lui Forni
Chair,
Research Committee
Acute Kidney Injury (AKI)

For the past year the Acute Kidney Injury (AKI) Section has had a strong focus on education and science. We had two Section meetings during the annual ESICM congress in 2017 in Vienna and during the ISICEM meeting in Brussels in 2018. Both were well attended.

EDUCATION

• Renal Master Class 2018

Last year the annual Post Graduate course was completely re-vamped under the lead of Antoine Schneider. The aim of this pre-congress course is to provide a practical, hands-on teaching on CRRT. Based on the feedback we received from the participants, we made some small modifications. The emphasis is now even more on interaction, with hands-on sessions, in small groups, and interactive case discussions with a strong faculty of AKI professionals.

As a novelty in 2018 the Renal Master Class will be joined by the Nurses and Allied Health Professionals Group.

• AKI e-learning modules

We are very excited to announce that in the past year a group of AKI Section members, under the lead of Miet Schetz and Marjel van Dam, re-vamped the old PACT modules on AKI into an e-learning platform.

RESEARCH:

• PEACE

Additional data were retrieved and will be presented during the upcoming Section meeting.

• PrevAKI

This 2016 Trials Group award winner, with Alexander Zarbock from Munich, Germany as PI, aims to evaluate whether a restrictive fluid regimen will lead to a lower cumulative fluid balance in critically ill patients with AKI. The PIs for this study are Sune Vaara and Marlies Ostermann. Several centres have started, or will start recruiting in 2018.

• REVERSE-AKI

This new project that came forth from the Spring 2017 AKI Section meeting. The aim of this study is to evaluate whether a restrictive fluid regimen will lead to a lower cumulative fluid balance in critically ill patients with AKI. The PIs for this study are Sune Vaara and Marlies Ostermann. Several centres have started, or will start recruiting in 2018.

• Round table on AKI research

As a novelty, this year a group of AKI Section members will come together for a one-day Round Table meeting, during which we will discuss the top priorities in research in several areas of AKI for the next five years.

ARF Section

The Acute Respiratory Failure (ARF) Section of ESICM is one of the largest sections, with 1,095 voting members. The Section members are actively engaged in research and educational activities proposed by the Society and by the Section itself. The Section held two meetings during the LIVES 2017 conference in Vienna and at the ISICEM 2018 conference in Brussels, each meeting with an active attendance and participation of more than 30 members.

The Section collaborates in the drafting of the programme for the LIVES conference, and on the PG course on Mechanical Ventilation, which is every year improved thanks to the Section’s feedback.

One of the studies promoted by the ARF section, LUNG-SAFE, has been very successful. After the first paper (JAMA, 2016 Jul 19;316(3):347), six sub-studies have been published in relevant journals, and more are ongoing.

The Section is currently involved, along with the Trials Group, in the WEAN SAFE (WorldwidE AssessmeNt of pAtients From ventilatory assistancE) a multi-centre, prospective, observational, 4-week inception cohort study. Enrolment took place during October 2017 - May 2018 and more than 500 ICUs worldwide have participated, with >12,000 patient enrolments.

The PLUG working Group is an active working group of the ARF section. It is an international cooperative project that deals with the measurement of esophageal pressure in mechanically-ventilated patients. The group, which has structured itself with the nomination of a scientific committee, holds periodic meetings (including a full-day meeting on the occasion of the SMART conference in Milan), where scientific abstracts are discussed.

Following up the request of the DPD, the Section has appointed Dr. Hadrien Rozé and Dr. Fernando Suarez Sipmann as Section representatives for educational activities.
Cardiovascular Dynamics (CD) section_

Activities 10/2017 to 9/2018

• LIVES 2017 (Vienna)
  - The major activity has been LIVES 2017 (in Vienna), with many sessions organised by our Section.
  - Postgraduate (PG) course project: this year we had a 1.5-day PG course entitled “Haemodynamic management in patients with shock”.
  - Furthermore, there was a PG course entitled “Basic course in Echocardiography”, as well as an ‘Advanced course in echocardiography: LV systolic and diastolic function, RV function”.
• LIVES 2018 (Paris)
  - The CD Section has proposed a programme including a pre-congress master class (see below)
  - Several members of the Section participated in the abstract selection for scientific contributions to LIVES 2018. The Chairs participated in an abstract selection meeting and several Programme Committee meetings.
  - There will be a two-day PG course organised by our CD Section in collaboration with the SIS Section (one day each). The title of our day is the ‘Hemodynamic Master Class’.
  - Several active members of the CD Section are also involved in the awards selection process of the Society.
  - Members of the Section actively participate in the Journal Review Club (to be found on the ‘news’ section of the ESICM website).
  - Furthermore, the Section held a webinar on Endpoints of resuscitation on March 14th, 2018.
  - The Section was involved in the development of an e-Module on Haemodynamic Monitoring for the ESICM Academy.
  - The Section has developed a survey on transfusion practice in the ICU (TRACE survey).
  - The Section is drafting a working document on “Metrology for Intensive Care”
  - The Section has proposed two studies on the use of vasopressors amongst European Intensive Care Units to the ESICM Trials Group. One is a randomized interventional study on the use of Diastolic Blood Pressure to initiate vasopressors in septic shock patients, the other is a prospective, observational, multi-centre, cohort study on Intensive Care management of Arteriogenic shock and acute Heart Failure (SCENARIO-HF).

We would like to thank all the members of the Section for their on-going and active support.

Thomas Scheeren Chair of the CD Section
Jan Bakker Deputy Chair of the CD Section

Transfusion Task Force

Background
This topic blood transfusion is highly relevant for intensive care medicine and the ESICM Transfusion Task Force was launched in 2017. The current Chair is Alexander Vlaar.

Mission
To support knowledge, research and education of blood transfusion in the context of intensive care medicine.

Guidelines – The ESICM Transfusion Guideline Part I
The Task Force began by writing the first ESICM Transfusion Guideline, tailored for the bleeding intensive care patient. Part I will be on non-bleeding critically ill patients and is expected to be published in 2019.

Research – TRACE survey
This is an international survey to understand transfusion practice in ICUs worldwide. Since international transfusion guidelines for the intensive care setting are lacking, we hypothesise that a large variation in transfusion practice exists. The aim of this survey is to use the information gathered as a baseline measurement prior to implementation of the new Transfusion Guideline being prepared by the ESICM Transfusion Task Force.

Upcoming projects
• The ESICM Transfusion Guideline Part II
Part II of the ESICM Transfusion Guideline will be an evidence-based Blood Transfusion Guideline tailored for the bleeding intensive care patient.
• INPUT trial
This is an international multi-centre prospective observational point prevalence study to quantify current transfusion practice in ICUs and investigate differences in transfusion practice between and within different world regions (Europe, Americas and Asia).

ESICM ANNUAL REPORT
2017-2018

Activities of the ESICM: Division Of Scientific Affairs

Ethics (ETH) Section_

In 2017, the Ethics Section Chair and Deputy both participated in preparing and shaping the Society’s annual congress in Vienna. They were present at all the preparation meetings and reviewed and selected the abstracts for the poster presentations. This resulted in a prominent presence of ethical issues during the congress and there were several interesting and well-attended sessions.

Even more important, however, were the very lively discussions and interaction between faculty and the audience and among the members themselves during these sessions. In addition to the specific ethics presentations, members participated in more general sessions and debates. There was a very well-attended section meeting during the annual congress and also during ESICM in Brussels, where the goals and projects of the section were discussed. Valuable contacts were established which are essential for future projects and cooperation. Preparation by the Section has started for LIVES 2018 in Paris.

The Ethics Section has grown to over 300 voting members. Its members are involved in numerous research projects, including ETHICUS II, led by Charlie Sprung (manuscripts in preparation); the DISPROICUS project, led by Dominique Benoît (published in ICM) and the Euro02 project from Hanne Jensen and Rik Gerritsen (published in two papers: one in JCC and one in Critical Care). Rik Gerritsen received his PhD from Groningen University (NL) defending this project. In 2017, the Section obtained its first ESICM grant to facilitate a systematic review on the role of palliative care in the ICU. The project is led by Ethics Section member Victoria Metsak. Several other ideas and proposals are underway.

The Section’s statement on inter professional communication is in its final stage before publication and the Section organised a webinar for the Society on clinical ethics. In summary, the Section is growing both in terms of its membership and its research activities, as well as the awareness among the critical care community that intensive care means making choices and that ethic can support intensivists to make the right choices. Members from around the world can use the ESICM Ethics Section as a platform for contact, reflection and research.

Rik Gerritsen Chair of the ETHICS Section
Christiane Hartog Deputy Chair of the ETHICS Section

Alexander Vlaar Chair of the Transfusion Task Force
Maurizio Cecconi Co-Chair du Task Force Transfusion

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Infection Section

The mission of the INF section is to organise education and facilitate research to improve outcome in the prevention and treatment of infections in the critically ill patient. There is an important focus on all aspects of infection management, including infection diagnosis, antibiotic therapy and ancillary treatment.

The Section had well-attended meetings at LIVES in September 2017 and at ESCIM in March 2018.

At the LIVES 2017 meeting, the Section co-organised a joint ‘Fundamentals of Sepsis Diagnosis and Management’ masterclass, co-organised with the SIC and CO Sections. At this year’s congress there will be a one-day Masterclass focusing on antibiotic use, coordinated by both the Working Group and the Section. The Section will also develop an educational track at the meeting – which will be done together with the DPD and the ESICM office.

The learning material is currently in different online locations (e.g. webinars, webcasts, journal reviews) and also face-to-face, e.g. Masterclasses, congresses and Fellowships. The idea is to align these and allow members to follow a track combining all these approaches. Section members are encouraged to participate.

The Section has been involved in the new courses organised at the Brussels Office. Managing Pneumonia in ICU was the first course to run in this new format. Feedback was positive, and members are encouraged to attend the next courses.

The current section scientific projects include:

• The ABSES study, led by Stijn Biot, is an ESICM-sponsored, multinational, prospective, observational study on intra-abdominal infections (IAIs) in critically ill patients, with a special emphasis on epidemiology and outcomes. The ABSES inclusion period has ended and data analysis is ongoing.

• The Pneumolspire study is an international multicentre, prospective observational cohort study of nosocomial pneumonia in intensive care units. This project is organised by the Pneumonia Working Group and led by Despina Koulenti and is actively recruiting patients.

• The DIANA study on antibiotic use and de-escalation in critically ill patients is closed. Data cleaning is ongoing and the final results are expected in Q4 of 2018.

• EURCEA study is a joint project with the NIC section that focuses on meningoco-encaphalitis.

• BLIND III study, a large multinational, multicentre project initiated by Jeff Lipman, in collaboration with selected European centers; the project will run for 4-5 years.

Future projects under development include:

• EUROBACT 2.0 (JF Timsit); JF Timsit and A Tabah are setting up a new EUROBACT study following the successful first study.

• AURORA (J De Waele). The topic of Antibiotic Resistance will be tackled in the AURORA study, with the participation of ESCIM.

The Infection Section presented three proposals for the Trials Group Award:

• cardiacEvents aetiology in severe community acquired pneumonia RESILIENCE (led by Ignacio Martin-Loeches)

• EUROBACT 2.0, led by JF Timsit and A Tabah.

• PosaFlu, led by J Wauters.

The Section is collaborating with other groups to develop guidelines in several areas. These topics include:

• Antibiotic de-escalation in the ICU (together with ESCMID)

• Use of therapeutic drug monitoring in critically ill patients (together with ESCMID, IAD/TDMCT)

• Management of multidrug resistant infections (together with ESCMID)

• VAP prevention

• Severe CAP (with ERS)

• ESICM/ESC/MD Task Force on Practical Management of Invasive Candidiasis In Critically Ill Patients.

Working group on Antibiotic Use activities

The group has increased its involvement in the Society’s activities with most members established as Journal Review Board members. The Section has been involved in the new courses organised at the Brussels Office. Managing Pneumonia in ICU was the first course to run in this new format. Feedback was positive, and members are encouraged to attend the next courses.

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Neurointensive care (NIC) section

The NIC Section has developed several activities over the last year, thanks to the great enthusiasm and participation of its members. This has been the second year of Fabio Silvio TACCONE (Brussels, Belgium) and Lara PRISCO (Oxford, UK) as Chair and Deputy, respectively, of the Section. Lara will resign from her position at LIVES2018 and a new Deputy will be elected thereafter.

Two Working Groups are active within the Section: the first one on «MULTIMODAL NEURO-MONITORING», led by Raimund HELBOK (Innsbruck, Austria), aims to promote research on the use and relevance of Multi Modal Monitoring (MMM) in neuro intensive care. This new research project will be presented at LIVES2018. The second Working Group focuses on «EPIDEMIOLOGY AND NEUROPROGNOSTICATION» and is led by Geert MEYFROIDT (Leuven, Belgium). The aim of this Working Group is to develop multicentric observational cohorts of patients to investigate particular epidemiologic patterns, evaluate clinical practices, promote surveys among centers and potentially develop clinical interventional trials on "burning" questions where a knowledge gap exists.

The NIC Section, via G MEYFROIDT and L PRISCO, will be active part of the SANDMAN study, which will describe sedation strategies in critically ill patients, including those with primary brain injury. The study has been endorsed by the ESICM Trials Group.

A third trans-sectional Working Group on DELIRIUM has been recently created; Romain SONNEVILLE and Fabio Silvio TACCONE will initially represent the NIC Section in this group. The first meeting and Chair election are scheduled during LIVES2018.

A consensus paper on delirium definition and management is currently ongoing, and two members of the NIC Section (T Sharshar and N Latronico) are involved.

EDUCATIONAL ACTIVITIES

The NIC section is contributing to the development of "neuro" topics for the eLearning platform within ESICM. The coordinator for the NIC Section in this project is Lara Prisco, Oxford, UK.

• eLearning platform and Education

The NIC Section has different ongoing studies within the ESICM Clinical Trials Group: 1) International prospective observational Study on Intracranial Pressure in intensive care (ICU) - SYNERP-ICU. (Giuseppe Citerio, University Milano Bicocca – Ospedale San Gerardo); 2) Extubation in Neuro-ICU patients and Outcome. The study is led by Fabio Saliceti (University Milano – Polyclinic San Matteo); 3) EuRECA The EURopean Registry for Extubation in Critical Care (Karim Asehnoune, CHU Nantes). The study has now completed the second year of inclusion; at the moment 52 recruiting centres have screened more than 4,000 patients and randomised nearly 300. New centres will be involved in the study before the end of 2018. The PI of the study is Fabio Silvio Tacccone, Brussels, Belgium.

• Survey on fever management after acute brain injury

The survey has been completed. The PI is Eduardo Picetti, Parma, Italy. The study has been published recently (Picetti E, Oddo M, Prisco L, Helbok R, Tacccone FS. A Survey On Fever Monitoring and Management in Patients With Acute Brain Injury. The SUMMA Study. J Neurosurg Anesthesiol. 2018, Epub ahead of print).

• Transfusion strategies in acute brain injured patients: TRAIN Study

The TRAIN study, supported by an ESICM award of €50,000 Euros, is a multi centre trial that aims at evaluating two different thresholds of hemoglobin (7g/dL vs. 9 g/dL) to initiate red blood cells transfusions in patients with an acute brain injury (traumatic brain injury, subarachnoid haemorrhage and intracranial hemorrhage). The study has now completed the second year of inclusion; at the moment 52 recruiting centres have screened more than 4,000 patients and randomised nearly 300. New centres will be involved in the study before the end of 2018. The PI of the study is Fabio Silvio Tacccone, Brussels, Belgium.

• TBI collaborative study group

This is a multi centre retrospective observational study involving centres in Europe and Australia aiming to describe common practices in the management of patients suffering from Traumatic Brain Injury (TBI). The PI of the study is Rinaldo Bellomo, Melbourne, Australia. A first study on the effects of mannitol or hypertonic saline on the outcome of TBI patients has been submitted for publication.

NIC SECTION PROJECTS

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The next meeting of the NIC Section is scheduled during the ESICM LIVES 2018 in Paris.
Peri-Operative Intensive Care (POIC) section

The POIC section is currently collaborating with NEXT to develop The European Perioperative Intensive Care Course (EPICC). This will be an innovative, comprehensive learning experience for ESICM members in the field of Perioperative Intensive Care Medicine. Focus will be on the development of e-learning content in the new Academy format, as well as developing a new educational course on perioperative intensive care, in close collaboration with Melania Istrate from the ESICM office.

Our other main activity is the major contribution to the ESICM congress programme, ensuring that peri-operative medicine topics are well represented. The Section designed a Postgraduate course for the annual meeting in 2017 that was fully booked, covering different aspects of caring for the high risk surgical patients. In 2018 we are planning a Masterclass on Perioperative Intensive Care in the simulation centre of the University of Paris (iLumens).

Our Section has two working groups:

POSTOPERATIVE DELIRIUM AND COGNITIVE DYSFUNCTION WORKING GROUP (PODECOD WG):

The Working Group is supporting the study “European Management of Analgesia, Sedation and Delirium (EuMAS)” that has been awarded the NEXT Start-Up grant. Currently the working group runs different research projects, e.g.: “Biomarker Development for Postoperative Cognitive Impairment in the Elderly (BioCog)”. An EU FP-7 project for which we expect the first papers soon.

The PoDeCoD WG plans to become a new cross-sectional Working Group focused on Delirium and Long Term outcome (DeLTO), with members from the HSRO, NIC and POIC Sections. The constitutional meeting of this new Working Group will take place during LIVES 2018.

PERIOPERATIVE OUTCOME RESEARCH WG (POR):

The Working Group is running an international observational trial about postoperative vasopressor use, called SQUEEZE. The study won this year’s ESA Clinical Trial Network award and has been endorsed by ESICM. Similar to the successful collaboration of the EuSOS study, ESICM and ESMRMB are collaborating in this trial to use common synergies. We are currently recruiting study centres and expect to include >400 hospitals and >40,000 patients.

The Working Group has developed research proposals relating to improved perioperative therapy. Recent focus centred on postoperative pulmonary complications. The Working Group performed a Delphi consensus to identify risk stratification measures and treatment options. This part has been finished and the paper was published in April 2018.

Ib Jønner
Chair of the POIC Section
Aarene Feldheiser
Deputy Chair of the POIC Section

SIS section

1. The Section played a significant part in the composition of the scientific programme of ESICM Lives 2017 and 2018. A PG course on sepsis was created by the Section during Lives 2017 and a master class on the management of septic shock will take place during Lives 2018 in collaboration with the Cardio Vascular Section of the ESICM.

2. The activities of the ESICM Research Committee were supported and coordinated by the Section Deputy. This included proposals endorsed by the Section for a research grant. One of these proposals was supported and funded by the Research Committee.

3. The Section has assisted the e-learning Committee by updating the modules relating to Sepsis and MOF. The Section is planning more collaboration on an e-learning course about the management of sepsis. Several members of the Section have voluntarily contributed to these activities.

4. A new Master class on the Management of Sepsis was successfully provided at the ESICM training centre in April 2017 and feedback from the delegates was very positive.

5. The Section supported and endorsed the World Sepsis Day. Following the Sepsis Resolution, the WHO is highly interested in collaborating with the ESICM on issues related to sepsis prevention and quality improvement initiatives.

6. The Chair of the Section contributed to the activities of the Surviving Sepsis Campaign Guidelines Steering Committee and updated the members of the Section about these activities during the regular Section meetings.

7. Two regular meetings of the SIS Section took place during Lives 2017 and ISICEM 2018.

8. Dr. Ricard Ferrer was elected to be the next Chairman of the SIS Section.
Global intensive care Working group

The past year has been another exciting, productive and meaningful year for the Global Intensive Care Working Group of ESICM. Membership numbers continue to increase and frequent inquiries are made with respect to the group, its activities, participation, and possible collaborations with it. Two very productive and enthusiastic formal meetings were held in the past year - at the ESICM LIVES Congress on 26 September 2017 in Vienna, Austria, and at the ISICEM Conference in Brussels on 21 March 2018. Several teleconferences, communications and telephone calls were also held during the year pertaining to projects, collaborations, papers, initiatives, and for support purposes.

Nine papers have now been completed with important recommendations and suggestions for sepsis and intensive care management in resource limited settings, the bulk with additional on-line supplements. Eight of the papers have been published in Intensive Care Medicine, and one in Trans R Soc Trop Med Hyg. This was a remarkable, concerted, committed and enormous effort by group members, and truly represents a first in the field with respect to the magnitude of the initiative in this domain. Fine support and encouragement came from senior members of the group including Marcus Schultz, Arjen Dondorp and Martin Dünser. All the papers are available as open access and thus free of charge, such that they could be made available broadly and globally. A current initiative is now underway to put this information into book format.

A host of other publications in excellent peer-review journals, and emanating from members of the group and its work also occurred during the year. These covered an important commentary on the latest Surviving Sepsis Campaign guidelines with respect to the perspective from low- and middle-income counties (LMICs), a major review on tuberculosis in intensive care, a state-of-the-art commentary on tuberculosis with respect to critically ill patients, and intensive care in rural sub-Saharan Africa evaluating over 5000 patients, amongst others. These papers were accepted for publication in journals such as Lancet Infect Dis, J Crit Care, Intensive Care Med and Anaesthesia.

The field study in Rwanda performed by Working Group members involved in the “Sepsis in Resource-Limited Nations” initiative of the Surviving Sepsis Campaign was also completed. This included over 1500 patients and has recently been published in both Intensive Care Med and Critical Care Med. Further sub-analyses are planned.

Various group members also contributed to a unique book that has just been published “Clinical Examination Skills in The Adult Critically Ill Patient”, Clinical acumen has been an entity that has largely been overlooked and perhaps neglected, and this book represents a most welcome addition to the field.

Working group members have also been involved in two initiatives by our Society – one on fluid resuscitation, and one on antimicrobial resistance (in collaboration with ESMID). One has been published in Intensive Care Med, and the other has been submitted. The protocol for the epidemiological study addressing infections in LMICs has also been completed.

Additionally, excellent work by members and the group has also occurred with respect to telemedicine, nursing projects and initiatives, and the iCertain project that has had meaningful impact in many regions of the world. There have also been discussions and a presentation to try and improve trauma care in LMICs. Interactions with various organisations, including representatives from WHO, World Anesthesia Society, Emergency Medicine Special Interest Groups, and the Surviving Sepsis Campaign, have also taken place and been fruitful. Assistance, involvement and dissemination of information for ESICM endorsed projects, such as the DecabICUs study and TOTEM study, has also been facilitated by the group.

The next Surviving Sepsis Campaign guidelines will now have representation from our group. Several members have delivered extremely well-received talks at congresses around the world. Very excitingly, we look forward to an important announcement in the coming weeks with respect to a Sepsis Course that has been put together by group members for LMICs. As far as we are aware, nothing like this particular course currently exists!

We would like to extend our most sincere and gracious thanks to ESICM, all the wonderful members, and all those involved in the organisation, and will continue with heightened enthusiasm!

Warmest regards and best wishes

Mervyn Mer
1. DPD	Division of Professional Development

The Division of Professional Development (DPD) comprises:

• The Examinations Committee
• The e-Learning Committee
• The Clinical Training Committee
• The Communication Committee

The DPD has had another busy year with the development of new the Master Class series, further progress with the ESICM Academy and the Division of Professional Development (DPD) and the creation of educational pathways. This has been facilitated by collaborative work within the DPD committees, but also strong support from the scientific sections and Congress Committee. We are now able to offer our ESICM members a wide portfolio of education activities.

Also, for the first time, the Committee undertook an education needs assessment to better understand our members’ educational needs. We had over 400 responses and we would like to thank our members for participating in this survey. Using data from this survey, we have been able to formulate the future education strategy for the Society to ensure it is tailored to the wishes of our members.

Melania Istrate was appointed to join the ESICM DPD team. With her extensive background in education, she has been instrumental to the development of some of the new educational initiatives we have undertaken this year. We are delighted and honored to have her join our team.

Melania Istrate was appointed to join the ESICM DPD Division of Professional Development (DPD) for this year. Our multiple choice question database for the EDIC exam continues to expand and be refined. We would like to thank all who enabled this production surge since the four eCourses published by LIVES 2017. This will place us at almost two thirds complete in Phase-I transformation of the 46 old PACT courses.

A further three, new ACE Courses were commissioned to bring the total targeted ACE Courses at almost two thirds complete in Phase-I transformation of the 46 old PACT courses. A further three, new ACE Courses were commissioned to bring the total targeted ACE Courses at almost two thirds complete in Phase-I transformation of the 46 old PACT courses. A further three, new ACE Courses were commissioned to bring the total targeted ACE Courses at almost two thirds complete in Phase-I transformation of the 46 old PACT courses.

Creating a critical volume of updated and new learning material for the Academy was identified as a key priority for this year. The editorial process, under the leadership of the Editorial Board, was restructured and streamlined, based on best peer review practices. An efficient editorial pipeline was thus established. A lean Editorial Structure allows the coordination and integration of the efforts of relevant Business Units, such as the Assessments BU and Competencies BU on the one hand, while acting as the sole point of contact with authors, reviewers and Section Chairs and editors on the other hand. We further ensured GDPR compliance and updated IPR processes.

These concepts were further developed during face-to-face workshops and meetings, regular online and telephone meetings, first in the larger group and then devolved to BU level.

Resultant, but especially due to extraordinary effort by several individuals, we will publish 29 eCourses, re-named ESICM ACE courses (Academy Critical care Education) by LIVES 2018. We would like to thank all who enabled this production surge since the four eCourses published by LIVES 2017. This will place us at almost two thirds complete in Phase-I transformation of the 46 old PACT courses.

A further three, new ACE Courses were commissioned to bring the total targeted ACE Courses at almost two thirds complete in Phase-I transformation of the 46 old PACT courses.

At LIVES Paris, we will present our vision and strategy for Phase-II with a projected starting date of March 2019. Accreditation of the platform is in process.

The ESICM Academy eLearning ecosystem is crucially dependent on the underpinning technical development. This included content delivery advances, user experience improvements, servers and applications upgrades and improvements to satisfy the needs of ESICM Academy users and improve the User Experience and eLearning Toolbox.

Some specific developments include:

• User activity statistics: Course completion and grades are now available for all ESICM Academy users via direct link.
• This allows comparative analysis for example on completion, abandoned, grades etc. to enable course refinement.

Helpdesk Improvement, ESICM Website into the Academy Directory Service and Single Sign On service: A new requirement to seamlessly integrate Single Sign On functionality to the ESICM Website was introduced. This necessitated the development of several software plugins and components to streamline critical processes as User Management, Ticketing effort, Platform Statistics, User Profiles, Group Management, Course Management in the Helpdesk Application (https://helpdesk.esicm.org), with similar developments needed to enable Website for Single Sign On.

Collaboration Wide Bibliography Functionality: Inline citation parameterisation and further development of the Moodle v3.4 open source mobile app and Moodle Mobile Services plugin.

Online counterparts of each Moodle plugin were developed, which enabled services for offline quizzes, offline EDIC scoring type questions, CPOLL, eModule page, Quiz of the day, etc.

Quizz of the day: A mainly-offline plugin was developed to support a trainee engagement collaboration with the ETC to enable eCourses / ACE Course Tutors to time-schedule quizzes to deliver questions to trainees scheduled e.g. daily, weekly etc. There is now no limitation on the number of questions per quiz, or number of questions per time-scheduled event.

The Technical Team will present the plans and schedule for the next phase of technical development, support and maintenance at LIVES 2018.

The Clinical Training Committee

The Clinical Training Committee (CTC) is primarily responsible for the development of educational courses for the Society. The focus in 2017-18 has been the development of ESICM Master Classes at the ESICM Head Office in Brussels. The focus for 2018 has continued to be a series of 2-3 day intensive courses delivered by experts in their field. The instructor to candidate ratio for the courses is deliberately high to maximise interaction between the experts and candidates.

The courses use a variety of modern education tools, including blended learning, problem-based learning, mind-mapping, flipped classroom technique, fish bone technique, simulation, and case-based discussions. The courses are all now fully accredited with continuous medical education (CME) points by the Union European des Medicins Spécialistes.

Master Classes run this year include: Managing Pneumonia in the ICU (Course Director: Jan De Wee), Mechanical Ventilation: State of the Art (Course Directors: Jean-Daniel Chiche, David Chiumello, Claudia Guideri), Life-threatening Emergencies in the ICU (Course Director: Franki Duka), The Art of Trauma Care (Course Director: Jacques Duranteau), Fundamentals and Updates in Sepsis (Course Director: Yasser Sakr), Cardiovascular Physiology in ICU (Course Director: Maurizio Cecconi).

Several new courses are planned for 2019 and these include: European-German Intensive Care Course, Leadership and Management, Communication and Ethics.

The EDIC I and II Preparation Courses continue to be very popular with courses run in India, Brussels and ESICM Paris LIVES, and over 300 candidates enrolled in these courses this year. Our multiple choice question database for the EDIC I Preparation Course continues to expand and be refined. We now have over 700 high-quality multiple choice questions and mock exams on the ESICM Academy to help support candidates taking the EDIC exam.

The European Diploma in advanced critical care Echocardiography (EDECI) is now well-established, with an expanding franchise based on its effective competency based curriculum, logbook, webinar series and
2. Communication Committee

ESICM prides itself on the vast informational resources it is able to offer members and non-members online.

Our website and social media streams continue to provide a daily portal for intensive care and related medical professionals to access educational and scientific content, and the popularity of these online resources has grown exponentially in the past years.

Our website and social media streams continue to provide a daily portal for intensive care and related medical professionals to access educational and scientific content, and the popularity of these online resources has grown exponentially in the past years.

To date, we have 23,304 followers on Facebook, more than 14,500 on Twitter, 5,638 on LinkedIn and 1,679 members of our LinkedIn discussion group. Our very active ESICM Journals Review Club (EJRC) members have submitted and published more than 350 up-to-date article reviews, and our Society recognised their contributions for the first time in 2018 with honorary certificates.

ESICM works tirelessly to bring members the information they need about the Society when needed via direct eNewsletters. We want to ensure that none of the great benefits of membership, such as webinars, Master Classes and events like LIVES, EuroAsia and the LIVES Forum are missed.

Central to our mission is, of course, dissemination of foundational and clinical research. Our scientific journals provide the newest research in intensive care medicine – from basic science in our online OPEN ACCESS journal ICM Experimental (ICMx) to clinical practice in Intensive Care Medicine (ICM). The journals, led by Mervyn Singer and Elie Azoulay, and supported by exceptional editorial teams, have excelled in their efforts to drive these publications to their top potential.

In 2018, ICM's Impact Factor rose again, this time to 15.008, marking the highest impact factor for a journal that publishes only in intensive care medicine. ICMx continues to build its reputation with a number of highly cited publications over the past year.

Both Editors-In-Chief have been at the helm of their respective journals for six years and will end their mandate this year. We thank them for their hard work, unshakable dedication and immeasurable contributions to ESICM’s official journals and wish them the best in all of their endeavours in the years to follow.

ESICM’s Social Media (SoMe) Task Force has expanded its role this year to provide even more updates for those who aren’t able to participate in our events via ESICM blog submissions and posts on Facebook, Twitter and LinkedIn. At our annual LIVES congress, Twitter moderators are present at many of our sessions, so participants can interact with presenters even when they are not on site!

Without the efforts of the active members of the Communication Committee, the EJRC and SoMe Task Force, we would not be able to provide our members with such a vast wealth of resources. Thank you to all our invaluable contributors who helped us achieve so much this past year.

Jacques Duranteau
Chair of the Communication Committee

ESICM ANNUAL REPORT
2017-2018

The CoBaFaculty and CoBaForum_

The CoBaFaculty’s main task is to maintain, promote and develop the CoBaTrICE programme on behalf of the Society and to ensure networking and coordination with other stakeholders. The CoBaTrICE competencies have been updated to include new competencies, including echocardiography, ultrasound, ECMO and rapid response teams, and have been published as COBaTRICE 2.0.

The updated COBaTRICE syllabus and relevant documents can be accessed via www.cobatrice.org. The concepts of CoBaTRICE are now an integral part of postgraduate training in intensive care medicine in many European countries.

CoBaFaculty (the CoBaTRICE steering committee) and CoBaForum (the CoBaTRICE network, which includes representatives from each European country) continue to be a vital platform for exchanging ideas, promoting and enhancing the discipline of intensive care medicine in Europe.

The CoBaFaculty have been working closely on the ESICM Academy, ensuring that the educational content is mapped closely against the COBaTRICE competencies. In addition, the CoBaFaculty has undertaken a survey with the help of national representatives and national training organisations to better understand the current status of COBaTRICE and competency-based training in intensive care in Europe.

The success of the educational initiatives of the Society is attributed to the hard work being undertaken by all the committee members and their Chairs. I would particularly like to thank Dr Kobus Preller (Chair of the E-learning Committee), Estelle Pasquier (Project Manager for the ESICM Academy), Nikolas Stylianides (Technical Editor for the ESICM Academy), Dr Mo Al-Haddad (Executive Editor for the ESICM Academy), Dr Stephanie Cattin (Co-ordinating Editor for the ESICM Academy), Dr Franki Dulka (Chair of the Clinical Training Committee), Melania Istrate (Learning and Development Project Lead), Dr Christian Sitzwohl (Chair of the EDIC Committee), Dr Marco Maggiorini (Chair of the CoBaFaculty) and Dominique De Bloeim. Without their dedication and tireless commitment to the educational activities of the Society, we would not be here today.

Pascale Gruber
Chair Division of Professional Development
ESICM ANNUAL REPORT
2017-2018

NEXT- Report 2017-2018

NEXT is more diverse than ever. With an over-proportional annual growth and more than 2,300 members, NEXT has become a success story of the Society. Now in its 4th year, NEXT keeps driving innovation, creativity and has shown to be sustainable. With an international NEXT member, the lead of ESICM’s Diversity Task-Force and participation in almost all activities from the DSA and the DPD, the rejuvenating process continues. Enabling mobility, ensuring fairness and equality, as well as creating interesting research, congress and educational programmes, NEXT continues with its mission to help shape the future of the Society and the discipline.

MOBILITY

• Thematic Fellowships. In 2018 the thematic Fellowships became one of the most interesting and popular programmes of the Society. With the support of distinct industrial partners (Onion, Bayer and Medtronic), NEXT has allowed more than 120 members to spend a week in a Centre of Excellence to learn about delirium-management, infectious disease management, or ARDS. With now more than 300 applications, the Fellowships continue to grow.

• eMOVE. The eMOVE-project brings to life the idea of an electronic platform providing information about different European countries for intensivists on the move. The platform was first tested in Milan in 2016, and since then it has been constantly improved and updated to implement new locations and job-market opportunities. In the future, eMOVE will serve as a dynamic tool to support long-term mobility, a platform for job-offers, Fellowship applications and career development. eMOVE is aimed to be the digital face of NEXT’s mobility programmes.

RESEARCH

• Research PG-Course by NEXT. For the fifth time, the Research PG-Course will take place during the annual congress. What started as a small class for members interested in research has become a flagship ESICM course. Outstanding scientists, clinical researchers, and journal editors will share their experience. The ESICM NEXT Research PG course will cover topics from funding to scientific writing. The course has become increasingly popular and continues with a Research PG-track in the NEXT Lounge.

• Grants and Awards. We continue to support the work of young investigators aiming to develop a career in academic research. The NEXT Start-Up Grant is dedicated exclusively to young researchers in the field of Intensive Care Medicine. Together with the Research Committee, NEXT establishes its commitment and will again award one exceptional researcher, supporting his or her work for two consecutive years.

• European Journal Review Club. NEXT has been an active part of the Communication Committee since 2013, helping represent the Society in several media formats, including websites and social media. NEXT members started writing short reviews on articles published in major international journals. The group of reviewers has grown exponentially during the last six years, and now has 65 active members from different sections of the Society. It is interesting to note that 35 of these members are ICU trainees or young specialists. Three NEXT members contribute to the coordination of the Journal Club workload, guaranteeing a regular production of reviews and avoiding any overlap of topics and subjects.

• NEXT research. For the first time, NEXT is doing a research project and has already obtained an ethical approval from the IRB of Erasme Hospital in Brussels. With the change of our application and evaluation system for the Fellowships allowing more transparency, fairness and a timely selection process, we want to scientifically evaluate this system against the old one to identify potential barriers linked to the review process. Furthermore, the entire NEXT Committee underwent anonymously an ‘Implicit Association Testing’.

• NEXT Mentoring. In the 2018 edition of the programme, a total 71 ESICM faculty members, which equals one fifth of the last year’s LIVES congress, volunteered to become a NEXT Mentor. All Mentors submitted a Mentor Profile with information about their background, research/clinical focus, motivation to support the programme, as well as key words. Mentee applicants are now able to surf the different profiles.

At present, the first round of matching is ongoing. Our applications will be open during the LIVES congress, meaning that trainees and young specialists can be approached about the benefits of ESICM membership and may still apply. We are confident that the matching rate may reach 100%, which translates into a triplication of the previous round of the programme.

CONGRESS

• iCaBed4U. iCaBed4U is an innovative ESICM NEXT programme that aims to facilitate the mobility of Intensive Care trainees and offer accommodation options during ESICM LIVES. For the 2018 congress, NEXT has provided an online area where French NEXT members and French trainee members of SFAR or SRLF can advertise posts offering free accommodation. Trainees from abroad looking for a place to stay during LIVES 2018 can upload a post to express their interest in finding a place. Offering a place to members from outside Paris, gives easy access to the conference and helps everyone to build meaningful connections. While charity is part of our daily working-life, NEXT believes that the spirit of generosity and sharing should also be part of our NEXT congress-culture.

• NEXT Day. For the second time “Extracorporeal Membrane Oxygenation in ARDS” is the topic of our NEXT Day. Besides technical, clinical, and pathophysiological aspects, the focus lies on ethical and structural issues. Along with debates and blackboard-lectures, prominent experts will guarantee
a high quality PG course. The NEXT Day topic also fits in the Simulation Area that is co-hosted by NEXT advisers and was a great success last year.

- **NEXT Lounge.** The NEXT Lounge is the meeting-point for trainees and young specialists at the congress. The special programme covering new topics and new formats was a congress highlight during the last years, and will certainly continue to attract interested members. Part of the NEXT Lounge programme is the Young Lecturer Award, where talented candidates demonstrate their lecture skills, and are evaluated by an international jury. The best candidate is awarded with the "Young Lecturer Award", which guarantees a faculty place at next year’s congress.

**ORGANISATIONAL**

- **Leadership.** In 2018, Peter Schellongowski steps down as the NEXT Deputy Chair after six years of extraordinary work in the Committee and for the Society. The elected successor is Laura Galarza who will from now on be the Deputy Chair of the NEXT Committee. In its new structure, the NEXT Committee remains true to its purpose; to be the diverse voice of young members in the ESICM, and to help shape the future of our Society and the discipline.

- **International member.** Since 2017, the ESICM NEXT Committee has a nominated, non-European member. The nominated member is part of the EDIC Committee. The first nominated member is Rahul Costa-Pinto from Melbourne, Australia. We are very happy to welcome Rahul Costa-Pinto to the Committee and look forward to the collaboration.
The Nursing & AHP Committee continues to be very active in promoting the profile of Intensive Care nursing and AHP within the Society. The Committee has a small, but proactive membership of nurses, physiotherapists and other AHPs, including clinical psychology and dietetics, many of whom participate at several levels of the Society.

The N&AHP Committee consists of:
- Carole Boulanger, N&AHP Chair
- Johannes Mellinghoff [Congress Committee representative]
- Stijn Blot, Research Committee
- Anne Sophie Debue, ICU app development
- Silvia Calvino - Gunther, ESICM’s Journal Review Club
- Mireia Ilaurado Serra, the N&AHP representative for e-learning/development.

Projects & activities of the past year...

Congress
The October 2017 congress in Vienna saw active participation across all aspects of the programme. We were very proud to launch the initial version of the N&AHP App ‘APPIC’ at LIVES Vienna, under the expert guidance of Anne-Sophie Debue and the APPIC team. This ambitious project was delivered on time to a great deal of support and interest from all sections of the Society.

The activities of this group have continued and we currently have well over 1,000 users. At present there is a focus on translation into five other languages, with additional articles added to all sections, to be launched in Paris. The N&AHP Abstract Award Programme 2017 saw an increased number of abstracts submitted and awarded.

Research
The DecubICUs project, an epidemiologic point-prevalence study on pressure ulcers in ICUs, accepted as an ESICM Trials Group Study is in the completion phase of data collection collation. The aspiration was to enrol 10,000 patients and we are currently in excess of 11,100. N&AHP completed a survey [NAPMA] exploring the demographics of both our members and non-members to gain valuable data to plan the focus of the Committee and N&AHP going forwards. Results showed that the majority of our membership is experienced with a focus in clinical practice. Of note, the cost of membership across all countries was cited as a key limitation to membership. We are pleased to announce that this has led to agreement via the Executive Committee to reduce membership fees for N&AHP from LIVES 2018, in response to this finding.

INACTIC - International Nursing Advanced Competency-based training for Intensive Care. We are pleased to have secured an Erasmus Plus grant worth of over €142,000 to develop an international set of competencies, with underpinning curriculum and resources, for advanced level intensive care nurses. This project is well underway with the Delphi phase currently.

- N&AHP in the Journal Review Club [JRC]: N&AHP members are actively contributing to the JRC, led by N&AHP Committee member, Silvia Calvino-Gunther.
- Working Group on Physiotherapy
  David McWilliams, the Chair of this group, has an active network of physiotherapists and other professional groups interested in rehabilitation. The Working Group is focusing on educational and research matters concerning chest physiotherapy and early mobilisation.
- Web-based Infection course - supported by Bayer - has delivered an on-line course with significant resources available at a time to suit individual and shift requirements. Successful completion of the course and assessment awards free entrance to LIVES 2018. This test of a format for educational delivery has proved popular and will form part of our strategy for next year.

N&AHP continue to enjoy significant support from the ESICM office and Executive Committee. I am pleased to report another significant year of successful and increasing N&AHP activity within the society.
Everything goes very well for intensive care medicine (ICM).

Regarding the metrics, we will again be close to 2,000 submissions this year. The journal’s reach is outstanding as colleagues from many different countries have had access to what we publish. This year we are again reaching a breaking record for abstract reading, downloads (>2 millions), shares on the social media (altmetric scores) and for cites. All these metrics have almost doubled over the last two years (see Figure 1 that reports 2016 and 2017 data). Other important metrics that include time to decision (6 days), time to online release (15 days) and acceptance rate are stable over time.

MICM is the fastest publication media in the critical care track. The number of papers sent out for review has also increased and we are grateful to authors for sending high quality research to the Journal.

We were able to maintain the same ICM template every month and have reached the target source/ non-source items ratio. The journal publishes editorials to better appraise published papers, as well as pro con editorials, that usually relate to a thematic recently published in the Journal (the immediacy index is increasing). In addition, every ICM issue includes three What’s New papers, one Understanding the Disease, two images, and, from time to time, a From the inside paper. Two thematic issues (cardiovascular and conflict-of-interest issues) have been scheduled for 2018. Also, in the November issue, 8 RCTs will be published that will be released online simultaneously with LIVES.

The 2017 impact factor was released in June 2018. With an impact factor of 15.008, ICM ranks first among those publishing exclusively critical care and third (out of 33) in the critical care track of Thomson and Reuters’ Journal Citation Reports. ICM is now in the top 200 indexed medical journals (118/11,942) (Figure 2). This has allowed us to reduce the self-cite index to below 12% and to start again to increase the number of published papers.

As a reminder, the target number of papers is 250 per two years, and this is what we will be close to in 2018. Our editorial line targets quality and not numbers.

The next impact factor will be released earlier in 2019 and is expected to be even higher. This will be the last impact factor of this editorial board.

In December 2017, ESICM appointed an Editor in Chief elect and Professor Giuseppe Citerio from Monza will take over as of January 2019. Prof. Citerio was previously Associate Editor of the Journal with Prof. Massimo Antonelli and Deputy Editor with Elie Azoulay.
Giuseppe has already built his Board, which will include about 50% of new editors and 50% of editors who will leave in the next three years. Giuseppe will also build a new Board of reviewers and statisticians and a Board of junior editors will start working with the incoming Board in 2019. We are confident that Prof. Citerio, who has great experience, the most appropriate skills and the right team to continue to improve the Journal. We have already started a smooth changeover and Giuseppe has all the information needed to take over. Before handling all the new submissions, Giuseppe and his Board are working to make ICM more professional and more visible.

I am taking the opportunity by means of this report to thank ESICM for the strong and indefectible support over the last six years; I have always found a response when asking anything to the Brussels’s office. I would also like to thank my editors, who have taught me their specialty, been patient with my impatience, and have shared our ambitions for ICM. I will never forget this.

I would also like to thank reviewers and authors for having made what ICM is today. I have learned a lot from all of you and have found the best possible alibis with Samir Jaber, Anders Perner and Jean-Francois Timsit. Last, and not least, I am grateful to Martin Lavillonnière whose endless commitment and smartness has obviously led to ICM’s success. I wish the best of luck to Prof. Giuseppe Citerio and his Board and renew all my gratitude to the editors who worked with me, putting in ICM the best of their art.
Dear Colleagues,

Members of the Society, this is my annual Treasurer’s report for the business year 2017/2018.

The European Society of Intensive Care Medicine is a professional, non-profit organisation and its bylaws constitute the legal basis for the operation of the organisation.

ESICM is based in Brussels, Belgium, and complies with the legal rules of the Belgian Law of Associations with Number BE0467.040.744 in the Belgian Register of Associations. The organisation’s accounts comply with the Belgian fiscal provisions and are externally audited by Francesco Bandinelli on an annual basis.

Accounting and tax advice services are provided by our professional consultant firm, Belgian VAT Desk, supported by our CEO in the Secretariat. We follow a very rigorous process in establishing and monitoring our annual budgets and when considering the regulations of the non-profit law in our investments and financial policies.

In my position as Treasurer, my key interest is to carefully monitor the performances of our investment accounts to safeguard the organisation in times of financial crisis. Together with my colleagues in the Council, the aim is to make the right strategic decisions to focus on a sustainable and secure future for the Society and to decide how far we can go in developing activities to deliver our mission and aims.

This year we opened a new training centre in Brussels for the ESICM master classes throughout the year. It seems to be a success with more than 230 candidates using the facilities this year and I am sure many more in 2019.

The following report gives a fair and true view of the assets and liabilities and the financial position of ESICM and I invite you to read my further explanations of the financial statement of the fiscal year 2017 below.

Overall, I am pleased to say that the financial position of the Society is in extremely good health, and currently stands at 6,092,652 Euros.

One of the biggest risks to the Society is the annual congress. We continue to ensure that we monitor the use of our funds by keeping to a strict policy on areas such as travel expenses and ensure we spend sensibly. As a result, we have been able to invest more, year on year, into research, and in addition we have agreed to invest in developing a new e-learning platform.

Carl Waldmann
ESICM Treasurer
ESICM Balance sheet 2016_ 

<table>
<thead>
<tr>
<th>Assets</th>
<th>€K</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Fixed assets</td>
<td></td>
</tr>
<tr>
<td>I. Tangible assets</td>
<td>1,939</td>
</tr>
<tr>
<td>Land &amp; Buildings</td>
<td>1,939</td>
</tr>
<tr>
<td>Tools, furniture and fixtures</td>
<td>71</td>
</tr>
<tr>
<td>II. Financial assets</td>
<td>2,918</td>
</tr>
<tr>
<td>B. Current assets</td>
<td></td>
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<tr>
<td>I. Inventories</td>
<td></td>
</tr>
<tr>
<td>II. Accounts receivables</td>
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<tr>
<td>III. Cash on hands and in banks</td>
<td>6,326</td>
</tr>
<tr>
<td>Short-term investments</td>
<td>6,326</td>
</tr>
<tr>
<td>Cash at bank and in hand</td>
<td>560</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Equity and liabilities</th>
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<tr>
<td>A. Net equity of Association</td>
<td>5,819</td>
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<tr>
<td>II. Balance sheet profit/loss</td>
<td>165</td>
</tr>
<tr>
<td>Total assets</td>
<td>6,794</td>
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</table>

<table>
<thead>
<tr>
<th>Expenses</th>
<th>€K</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grants/awards/support/research</td>
<td>355</td>
</tr>
</tbody>
</table>

Every year, ESICM offers a number of research awards worth a total of € 355,000.

We are content to be in a strong position to spend such a generous amount of money to actively support ESICM members in their educational endeavors across Europe. This financial and activity-driven support fulfills our overall mission and aims to further improve standards in Intensive Care Medicine research in Europe for the greater good.

We have also invested for six years: € 1,410,000 for Awards, € 250,000 for Trials Group Awards, € 150,000 for the ECRF, and € 450,000 for the Surviving Sepsis Campaign.

CONGRESS COSTS

Costs attributed are rental costs for the congress and course venues, technical/network/IT, overall venue set up, with increased interactive provision, innovation from the Scientific Committee and other facility costs, which represent 20.02% of the total expenditure.

Social events and Faculty costs (travel, hotel) represent 7.49%, while 2.88% of the costs were spent on onsite staff and hostesses (including travel and accommodation).

ESICM ADMINISTRATION COSTS

The ESICM Secretariat looks after the everyday activities of ESICM, including all the business related to ESICM services, such as support of the Boards and Committees and follow up, organising LIVES, alongside the PCO, and developing the educational programmes, including the online platform. Besides this cost factor, all expenses (rental fees, annual running costs, etc.) for the ESICM office building are included.

BOARDS & COMMITTEES

4.21% is expenditure to support our volunteer work in ESICM. Board and Committee meeting expenses include travel, accommodation and catering costs for the respective meetings of governing Boards (Council, Executive Committee, General Assembly and National Societies) and Operating Committees (Scientific, Education, National Societies) throughout the year.
This conference aims to deliver most recent practical concepts around AKI syndrome, moving from the management at the acute phase to long-term renal dysfunction. Suitable not only for physicians and specialists, this 3-day conference offers nurses and other allied healthcare professionals comprehensive training with both foundational lectures and hands-on workshops designed to enhance care at the bedside.

**SCIENTIFIC COMMITTEE**
ESICM: Maurizio Cecconi, Lui Forni, Armand Scher, Carole Ichai
SFAR: Lionel Velly
SRLF: Bertrand Souweine

**SCIENTIFIC ADVISORY BOARD**
ESICM: Eric Hoste, Markus Dzemmes, Thoma Berlin
SFAR: Olivier Joannes-Boyau
SRLF: Frédérique Schortgen

Completion of training and competency-based testing designates the intensivist as being competent in advanced critical care echocardiography as a clinical skill.

**MORE INFORMATION >**
edec@esicm.org
Events

To view the full programme of our events visit
www.esicm.org/events

#LIVES2019
Introduction by the President & President-Elect
About ESICM
Activities of the ESICM: Division Of Scientific Affairs
Activities of the ESICM: Division of Professional Development
NEXT
N&AHP
ICM Journal
Treasurer’s Report
Key events 2019
Get more from your Society

GET MORE FROM YOUR SOCIETY
Join us_

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