

The Intensive Connection



The Intensive Connection



ESICM ANNUAL REPORT
2018-2019

esicm.org

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The ESICM Annual Report describes ESICM activities from October 2018 to October 2019.

Only the Treasurer's Report refers to the fiscal year from 1st January 2018-2019.



"As an organisation representing a unique profession, we have a strong presence and reputation throughout the world".

Dear Colleagues

Introduction by the President and President Elect

We would like to begin this annual report by thanking all our members for helping us shape the Society that we are proud to represent on their behalf.

It is almost one year since we launched the Society's Fund, ALIVE, and the Society, along with the generous support of GE Health Care, has successfully embarked on a training programme in countries of low and middle income.

Working closely with the Global Intensive Care (GIC) Working Group, the Society has designed a first course, written and delivered by members of the GIC Working Group. As the majority of deaths in these parts of the world are from acute infectious diseases and sepsis, the content covered the management of sepsis and included bedside clinical teaching. 42 health care workers in Uganda benefitted from the two-day training in Kampala in June, which involved local and visiting faculty.

The ALIVE sepsis course will be taken to Pakistan in November 2019 and Mongolia in May 2020. Content from the course's 16 modules will also be made available online and hosted on the Academy platform. We are very confident that the Fund will grow steadily and support more educational programmes in countries confronting sepsis around the world.

The Society took a major step forward tackling diversity inequalities in Intensive Care. We also established The Diversity Task Force that has worked on analysing issues and promoting solutions.

Not long after last year's congress in Paris, the Society's Diversity Task Force Statement Paper on diversity and equality was published in the ICM journal. This paper outlined a one- and three-year plan aiming at the identification of potential gaps and an implementation of concrete projects for members of the ESICM. Diversity-related data available from the membership database was analysed and included in the report in aggregated form.

A major achievement and cause for celebration this year was the new impact factor of our official journal, ICM, which has reached 18.967, ranking it second out of 33 medical journals in the critical care category and the most highly-ranked journal in this category entirely devoted to critical care.

Already being listed in the Emerging Sources Citation Index (ESCI) and in 'Web of Science', the journal now has higher visibility and greater citation potential.

Being now on an emerging impact factor list, it is very likely that ICM experimental will receive a 2019 impact factor in 2020. The journal has grown from strength to strength under the leadership of its previous Editor-in-chief, Mervyn Singer, and the current Editor-in-Chief, Peter Radermacher.

The decision was taken earlier this year to create a new Section to study Data Science, Big Data and Artificial Intelligence, and the future challenges and technological changes affecting intensive care medicine. This Data Science Section will involve intensivists, data scientists and academic partners. Ari Ercole, a consultant at the Neurosciences Critical Care Unit, University of Cambridge Hospitals Trust, UK, has been nominated to lead the Section with Paul Elbers, an intensivist at the Amsterdam University Medical Centres (UMC), as his deputy.

Interest in the topic was reflected in the numbers of multidisciplinary teams who attended the very first ESICM Big Data Talk and Critical Care Datathon in Milan in February of this year. The Milan event, organised by ESICM in collaboration with the University Humanitas University and engineering University PoliMi, with the Massachusetts Institute of Technology, Boston (USA) was a major success with more than 400 participants from all around the world. The goal was to promote collaboration between ICU professionals and Data Scientists and the development of Data Science in our specialty.

The event saw two parallel tracks with plenary sessions. In the Datathon track, teams of clinicians and data scientists competed in a friendly environment challenging each other to investigate clinical questions using large datasets of electronic health records. The Big Data Talk brought experts and participants together to discuss this growing topic. This is now an annual event and the Society's Data Science Section will be involved in next February's meeting.

EuroAsia 2019 attracted a record 556 participants this year and an equally impressive number of abstracts. We will continue our networking events in Asia and more information about next year's location will follow shortly.



Jozef Kesecioglu & Maurizio Cecconi

An additional, new-style Forum, will take place next February in Prague, with a focus on the key physiology concepts required to manage complex and real cases. Our regular Summer Forum will be in Dublin next May and addresses septic shock.

Closer integration of our N&AHP has been a long-term target for some time and there are now multi-professional representatives engaged in six of our Master Classes as part of the faculty and N&AHP attend the Master Classes courses in encouraging numbers.

A blended learning course on Critical Care Rehabilitation was offered to N&AHP members this year, who could connect online and come together in Berlin for the concluding face-to-face workshop held at LIVES.

AppIC has now been translated into five different languages – English, French, Spanish, Italian and Greek and a number of articles and topics added. Plans are in place to integrate part of the content on the Society's eLearning platform.

Along with our regular webinars and live debate style webinars, our portfolio of Master Classes has grown, with several new courses created this year. Many of our educational products attract industry support and receive accreditation points.

The European Society of Paediatric and Neonatal Intensive Care (ESPNIC) decided earlier this year to become more autonomous and to manage its own membership and finances. This means that we are now two separate, independent societies. We are very glad to see from our membership records that we have retained most of our paediatric members.

ESICM, despite its focus on adult intensive care, will carry on supporting activities aiming at improving adult and pediatric intensive care in conjunction with the Society of Critical Care Medicine (SCCM). Our two Societies have combined efforts to give the Surviving Sepsis Campaign (SSC) their strength and support.

Our contacts with our sister organisation, SCCM, further strengthened this year when we hosted the President and President elect in Brussels for two days in March. This opportunity provided a relaxed format for a most productive meeting, leading to new collaborations, and this was reciprocated in July at the SCCM's headquarters in Chicago.

We are expanding our public affairs and presence in Brussels, participating and collaborating with other medical associations. Along with the other partners of the European Society of Anaesthesiology (ESA), we are co-authoring a consensus statement on a common patient safety approach to perioperative care and endorsing and participating in the 2020 Patient Safety Policy Summit next March in Brussels.

ESICM is also part of the Biomedical Alliance - which supports biomedical and clinical research and fosters health research in the EU. ESICM representatives attend its regular meetings, including the Medical Device Update Regulation Task Force.

As you can see, we have had a busy and fruitful twelve months, but none of these activities and achievements would be possible without the hard-work and support of the Executive Committee, the Council, our Sections and Committees, our officers, authors and reviewers, and our ESICM members, who devote precious time and energy on behalf of the Society. As an organisation representing a unique profession, we have a strong presence throughout the world and a reputation that has evolved with the help of many. We thank each and every one of you for what has been an undoubted success this year.

Prof. Jozef Kesecioglu
ESICM President

Prof. Maurizio Cecconi
ESICM President elect

Introduction by the President & President-Elect

About ESICM

Who we are

Organisational Structure

Membership

Activities of the ESICM: Division Of Scientific Affairs

Activities of the ESICM: Division of Professional Development

NEXT

N&AHP

ICM & ICMx Journal

Treasurer's Report

Key events 2020

Get more from your Society

ABOUT ESICM_

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)

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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 LIISANANTTI (Finland)

Clinical Training Committee

Dolores MATEO (United Kingdom)
Stephen SHEPHERD (United Kingdom)

NEXT Committee

Silvia 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 74 national societies.

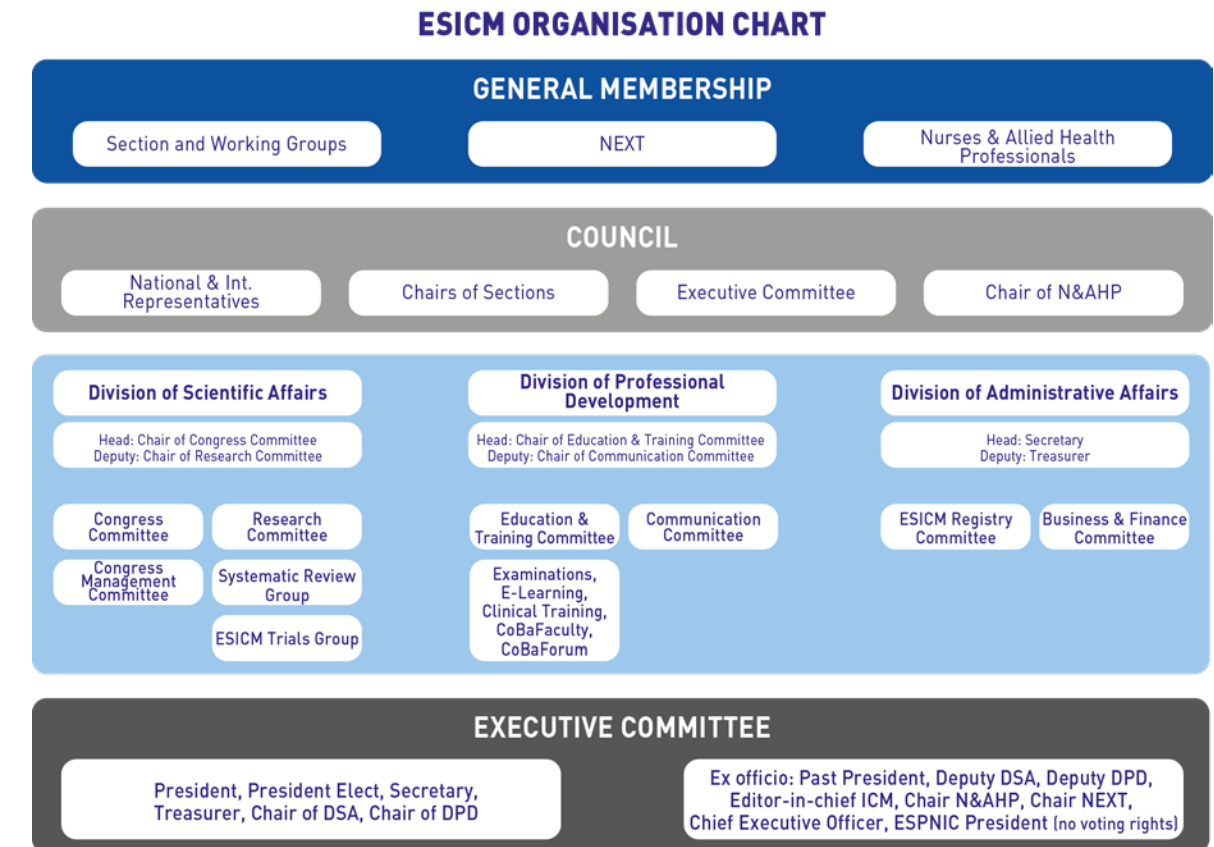


We ensure that all members and sub specialities are represented appropriately and that our national societies are given support and adequate say in the running of the Society. New societies keep joining and we have entered into partnerships to co-host joint events with several of our national members.

National Societies

- **AAI:** Association of Anesthesiologists-Intensivists (Russia)
- **ACCMG:** Association of Critical Care and Catastrophe Medicine of Georgia
- **AMCI:** Asociación Colombiana de Medicina Critica y Cuidado Intensivo
- **AMIB:** Associação de Medicina Intensiva Brasileira
- **ANZICS:** Australian and New Zealand Intensive Care Society
- **APMCTI:** Asociación Panameña de Medicina Critica y Terapia Intensiva
- **BSA:** Bulgarian Society of Anaesthesiologists
- **CCCS:** Canadian Critical Care Society
- **COCECATI:** Consorcio Centroamericano y del Caribe de Terapia Intensiva
- **CSARIM:** Czech Society of Anaesthesiology, Resuscitation & Intensive Care
- **CSCCM:** Chinese Society of Critical Care Medicine
- **CSICM:** Cyprus Society of Intensive Care Medicine
- **CSIM:** Czech Society of Intensive Care Medicine
- **CroSEMIC:** Croatian Society of Emergency Medicine and Medical Intensive Care of Croatian Medical Association
- **DASAIM:** Danish Society of Anaesthesiology & Intensive

- Care Medicine
- **DGAI:** Deutsche Gesellschaft für Anesthesiologie und Intensivmedizin
- **DGIM:** Deutsche Gesellschaft für Innere Medizin
- **DIVI:** Deutsche Interdisziplinäre Vereinigung für Intensiv- und Notfallmedizin
- **DSIT:** Danish Society of Intensive Care Therapy
- **ECCCP:** Egyptian College of Critical Care Physicians
- **EICS:** Emirates Intensive Care Society
- **ESA:** Estonian Society of Anaesthesiologists
- **ESCCM:** Egyptian Society of Critical Care and Emergency Medicine
- **FAR:** Russian Federation of Anesthesiologists and Reanimatologists
- **FSIC:** Finnish Society of Intensive Care
- **GSACCM:** Georgian Society of Anaesthesiology & Critical Care Medicine
- **HDIM:** Croatian Society of Intensive Care Medicine
- **HSIC:** Hellenic Society of Intensive Care
- **ICS:** Intensive Care Society
- **ICSI:** Intensive Care Society of Ireland
- **ISAICM:** Icelandic Society of Anaesthesiology & Intensive Care Medicine
- **ISCCM:** Indian Society of Critical Care Medicine
- **ISCCM:** Israel Society of Critical Care Medicine
- **JSICM:** Japanese Society of Intensive Care Medicine
- **KSCCM:** Korean Society of Critical Care Medicine
- **LCCS:** Lebanese Critical Care Society
- **LSAIC:** Lithuanian Society of Anaesthesiology & Intensive Care
- **MAITT:** Hungarian Society of Anaesthesiology & Intensive Care Therapy



- **MSA:** Macedonian Society of Anesthesia
- **NAF:** Norwegian Society of Anaesthesiology
- **NCS:** Neurocritical Care Society
- **NVA:** Nederlandse Vereniging voor Anesthesiologie
- **NVIC:** Nederlandse Vereniging voor Intensive Care
- **OEGARI:** Österreichischen Gesellschaft für Anästhesiologie, Reanimation und Intensivmedizin
- **OEGIAM:** Austrian Society of Medical and General Intensive Care Medicine
- **PTAIT:** Polish Society of Anaesthesia & Intensive Therapy
- **SAAI:** Serbian Association of Anaesthesiologists & Intensivists
- **SARRM:** Society of Anaesthesia & Reanimatology of the Republic of Moldova
- **SATI:** Sociedad Argentina de Terapia Intensiva
- **SCCS:** The Saudi Critical Care Society
- **SECCM:** Society of Emergency & Critical Care Medicine, Taiwan, R.O.C.
- **SEDAR:** Sociedad Espanola de Anestesiologia, Reanimacion y Terapeutica del Dolor
- **SEMICYUC:** Sociedad Espanola de Medicina Intensiva, Critica y Unidades Coronarias
- **SFAI:** Swedish Society of Anaesthesiology & Intensive Care Medicine
- **SFAR:** Société Française d'Anesthésie et de Réanimation
- **SGI-SSICM:** Swiss Society of Intensive Care Medicine
- **SIAARTI:** Società Italiana di Anestesia Analgesia Rianimazione e Terapia Intensiva
- **SICM:** Society of Intensive Care Medicine (Singapore)
- **SICS:** Scottish Intensive Care Society
- **SIZ:** Belgian Society of Intensive Care Medicine
- **SLAR:** Société Libyenne d'Anesthésie et de Réanimation

- **SOCHIMI:** Sociedad Chilena de Medicina Intensiva
- **SOCMIC:** Catalans Intensive Care Association
- **SOPEMI:** Sociedad Peruana de Medicina Intensiva
- **SPCI:** Sociedade Portuguesa Cuidados Intensivos
- **SRLF:** Société de Réanimation de Langue Française
- **SSICM:** Serbian Society of Intensive Care Medicine
- **SSIM:** Slovenian Society of Intensive Medicine
- **TARD:** Turkish Society of Anesthesiology and Reanimation
- **TSCCM:** Taiwan Society of Critical Care Medicine
- **TSIC:** Turkish Society of Intensive Care
- **TMSMCM:** Turkish Society of Medical and Surgical Intensive Care Medicine
- **VNACCENT:** Vietnam Association of Emergency Critical Care Medicine and Medical Toxicology
- **WICS:** The Welsh Intensive Care Society

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 enable interested 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.

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Netherlands



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President-Elect
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United Kingdom



JEAN-LOUIS TEBOUL
Treasurer
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Chair of the Division
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Netherlands



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Chair of the Division of
Professional Development
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2010-2012



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BRIRESH PATEL
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NEXT Member
Spain



**CHARLOTTE
VAN DEN BERG**
NEXT Member
Netherlands



MARIA VARGAS
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Italy



MASSIMILIANO GRECO
NEXT Member
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BURCIN HALACLI
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SILVIA DE ROSA
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International
Representative

OFFICE STAFF_



JOËL ALEXANDRE
Chief Executive Officer
Belgium

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Belgium



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Education & Learning



SARA VAN LERBERGHE
Office & Congress Assistant

Report by Lui Forni, General Secretary and Joël Alexandre, Chief Executive Officer

When asked to produce reflections like this, I find it useful to refresh myself as to the mission statement of our Society and to ensure, as your General Secretary, that we remain true to our principles. For those of you who need reminding, the aims of our society are:

- To promote and coordinate activities in the different fields of intensive care medicine
- To foster research and education
- To provide recommendations and guidelines
- To organise and coordinate international congresses and meetings.

So, can I satisfy myself, as Secretary, that we are delivering these? I would say "yes", and so much more! The ESICM continues to support and promote the advancement of knowledge in intensive care medicine, promoting the highest standards of multidisciplinary care of critically ill patients and their families through the three basic pillars that underpin our society: namely education, research and professional development.

The numerous events we promote, support and sponsor continue to grow. Webinars, Master Classes, Fellowships and eLearning modules, as well as our annual congress are all aimed at fostering the different fields and activities within our speciality. Indeed, our Academy currently offers a total of 53 eLearning courses, as well as being a platform for other education tools, supporting 9 online support classrooms for Master Classes; two industry-supported courses, two diploma preparation courses, two pathways and one ALIVE course.

In terms of our e-Courses, these have been submitted to the UEMS for accreditation and have been approved. Our Master Class programme also goes from strength to strength, and this year we are launching, in Berlin, a two-year learning pathway, for which over 1,000 participants have expressed an interest.

Furthermore, we are commencing our POCUS project, given that ultra sound is now a mandatory competency in critical care, and this lends itself well to the Society's existing platforms. It will also flourish, given the current expertise within the Society, and the current, ever-popular EDEC courses. Learning resources will be developed for this project that will utilise the Academy, Master Classes and webinars. The plan is that competencies can be agreed for a core CCUS that can be fed into CoBaTrICE for development, ultimately working towards a curriculum and accreditation pathway without encroaching on the EDEC diploma.

However, I would say that in the last few years we have gone further than that and taken strides to address other issues regarding the Society and reflecting our member base, ensuring fair and just access to all. From this desire, the Diversity Task Force has published its guidelines in intensive care medicine, drawing a line in the sand from which we can now progress. A special mention here for Bjorn Weiss.

Under his stewardship, the Task Force has made great strides from a long overdue ideal to reality.

Although there is still some way to go, we will meet again in Berlin to ratify the ethical code of conduct for officers of the Society, another positive step forward. I am determined that the Society should not be viewed as paying lip service to such guidelines, but will champion them in all aspects of our activities, evolving into an organisation that truly values all its members. Indeed, signs of change are already evident in the composition of this year's congress, with the faculty being more diverse in terms of both age, gender and inclusivity in the programme.

As well as promoting ourselves from within, we are increasing our collaboration with other European and international societies, including the ESA, the Biomedical Alliance, the Global Sepsis Alliance, and the national societies in Asia with whom we hold the EuroAsia conference, as well as fostering our relationship with the SCCM. We, as a Society, are much stronger and visible as a result. So, I do believe that I can say to you, our members of over 9,000 critical care specialists, that we do hold to the principles of our Society, but also expand upon them, continuing to evolve into a Society we can all be proud of.

As with any organisation, individuals come and go and over the last 12 months, both Sherry Scharff (well-known and remembered fondly to many of you, I am sure) has left the ESICM office. As has Elise Maquestiaux. We all wish them well for their new ventures. We also welcome Sara VanLerberghe, who has recently joined us as Education and Administrative Assistant. Starting in November, we will have a new colleague joining the Congress department.

Last, but not least, we are very proud of our Secretariat and ESICM CEO, Joël Alexandre, who received the Gold Award for Association Leadership at the European Association Awards (EEA) 2019. This award recognises the professionalism and quality of work carried out by the ESICM team under his direction, we would like to take this opportunity to thank all the staff for this achievement

Lui Forni
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 18.967)
- 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



The Intensive Connection
**GROWING
SOCIETY**

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-Learning Academy and 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 content 11♦ Dual membership 12♦ Free webinars led by top experts 13♦ AppIC: Dedicated App for Nurses & Allied Healthcare Professionals

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ACTIVITIES OF THE ESICM: DIVISION OF SCIENTIFIC AFFAIRS_



It is now one year since I took over from Maurizio Cecconi as Chair of the Division of Scientific Affairs and one year since our annual congress in Paris. The last twelve months have been fast-paced and eventful, and here we are again at what is the Society's 32nd annual congress in Berlin. I hope that you will come away from this year's congress feeling that you have learned a lot and renewed or found new contacts with fellow colleagues, for this is what it is all about.

LIVES 2018 attracted 6,200 delegates, 443 scientific, state of the art and industry sessions, 13 Master Classes, 350 faculty, an impressive 1,565 abstracts, 79 exhibitors and 18 major sponsors.

I wanted to build on this success and create an even more interactive experience this year, with occasions for our younger intensivists to be able to approach our more learned faculty, over breakfast and also the authors of published research, those responsible for some of our e-learning modules and the highest achieving EDIC candidates.

I was also keen to reduce the number of sessions and to meet our diversity targets. Indeed, this year's congress includes a higher percentage of talented younger speakers and more experienced female speakers. We have also introduced a family room, a new Neuro Lab, to add to the Simulation Centre and Tech Lounge, as well as our popular Arena, e-Area and the NEXT Lounge.

As well as LIVES, our main event has been Euro Asia 2019, which was our third conference in Asia and which this year took place in Taipei (Taiwan). The conference drew a record number of delegates (556) and 168 abstracts, which was well beyond that of the first two years. The number and representation of Asian participants was very encouraging. News about next year's meeting place will follow shortly.

Our annual LIVES Forum brought delegates to sun-filled Nice and focused on AKI as a syndrome. As we received many impressive bids for next year's Forum, we have decided to hold two, with some spacing in between. In February (7-9), we will launch LIVES Physiology in Prague. This will be a new concept, and a very interesting programme including leading experts has been drafted. In May (14-16) we will return to Dublin to address "Septic Shock: from the bug to organ failure".

The first Big Data meeting & Datathon in Milan last February proved to be a major success with 400 doctors, engineers and data scientists taking part, from all over the world. The Datathon now involves ESICM, the Humanitas University and Politecnico of Milan and the Massachusetts Institute of Technology. More and more hospital departments will employ data scientists in the future, rather than statisticians and, given the growing importance of machine learning and big data, ESICM this year created a new Data Science Section. This Section will play an important role in next year's Datathon on 31 January-2nd February 2020.

All in all, I think you can agree, our scientific programmes and events are growing in number and in stature, thanks to the solid team of Congress Committee members, the congress staff at the Secretariat and our esteemed faculty members. Here's to another successful year of collaboration!

*Armand Girbes
Chair, Division of Scientific Affairs*

1. ESICM Annual Congress and LIVES Forum



- 6197 delegates
- Abstracts submitted: 1565
- Abstracts presented: 1324
- Abstracts rejected: 15,4%
- Abstracts Oral Pres: 150
- Abstract Poster Pres: 1044
- Abstracts Arena presentation : 130
- Next Lounge Sessions: 22
- Tech Lounge: 19 sessions
- Arena: 17 sessions
- Simulation Centre: 4 areas
- 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 79
- Industry sessions: 26
- SQM: 1643,5

What our delegates liked best at LIVES 2018_

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.

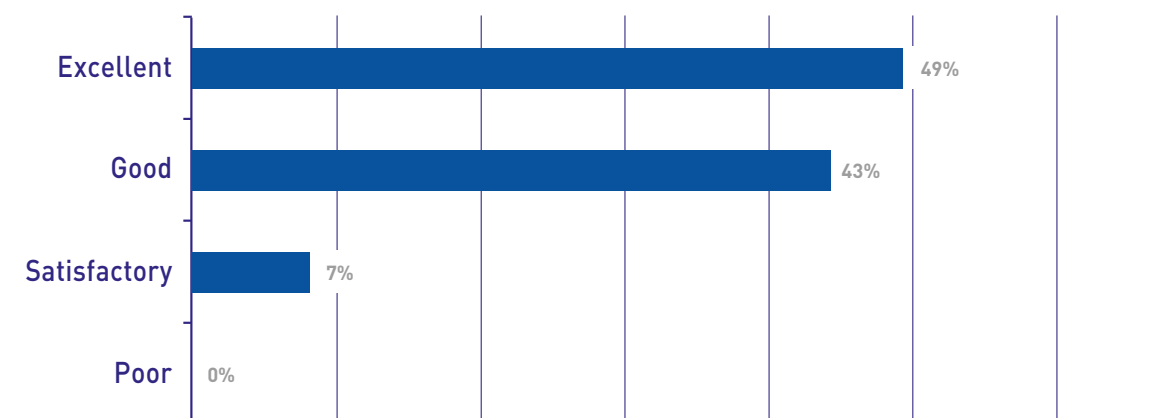
Congratulations to ESICM



10 top submitting countries

Country	No. of submitted Abstracts
Spain	257
United Kingdom	161
Korea	93
France	90
Italy	71
Brazil	70
Japan	67
Netherlands	65
Germany	51
Tunisia	49

How satisfied are you with LIVES 2018 in general?



2. ESICM Research



Report of the Research Committee 2018-2019 _

Research is more than ever a pillar of ESICM. The steady growth of the research activities over the last eight years indicates that the Society is meeting a real need. To be able to continue in a sustainable way, the Research Committee has been reflecting on how to better tackle this challenge and serve both the critical care community and its patients.

The creation of Business Units within the Research Committee is a first result of this process. The aim is to divide the different tasks among smaller groups of Research Committee members who not only have the expertise, but are also committed to engage in different projects.

Four Business Units have now been set up, dealing respectively with Surveys & Projects, Awards, Patient Affairs & Family Engagement and Education.

The Society is also re-considering how best to support research projects, given the many changes in the organisational aspects of clinical trials. As ESICM does not have the capacity to be the official sponsor of studies, new formats to facilitate research need to be developed.

Education of researchers also is an area where the Research Committee recognises the need for support, and the Committee has started to work on this, in close collaboration with other ESICM Committees.

Following the same trend, this year has witnessed an

increase in the number of consensus statements, guidelines and recommendations and endorsement requests. The Society is currently brainstorming on a new endorsement procedure that shall also encompass the endorsement of research projects.

COMMITTEE AFFAIRS

The elections that took place in May 2019 were very important for the Research Committee: It is a crucial time for the different mandates: Five Section Deputies will be succeeded, starting at the General Assembly on 1st October 2019 in Berlin: AKI, HSRO, ETH, SIS, TEM.

Two NEXT Committee representatives will also change, and we will have a new deputy from the "Data Science" Section. We deeply thank all those who have served the Committee.

BUSINESS UNITS

i) Education

The idea of this Business Unit is to educate the researchers about research methodology, scientific writing and statistics. A specific pathway would include access to online resources and possibly a course. A mentoring programme for researchers could also be considered.

ii) Awards

After having drastically improved the application platform, it was felt that the review process had to be changed as well. The 2020 platform shall just need some minor improvements.

iii) Patient and Family Engagement

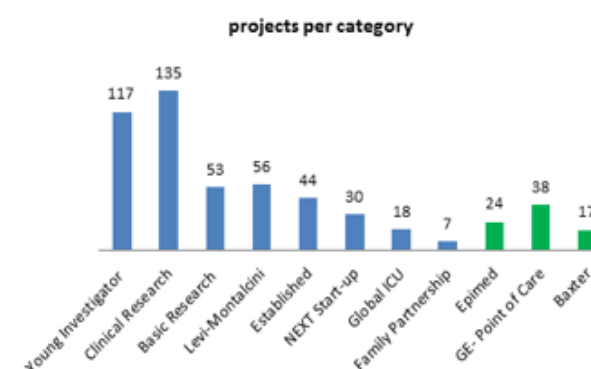
This unit is reflecting on the need to have more awareness among patients and families about what research is and why it is important, but also why involving patient representatives in large projects is necessary and why patient-centred outcomes are increasingly used.

iv) Surveys & projects

Revised application and review forms are being drafted. This is necessary in order to cope with the high number of endorsement requests.

RESEARCH AWARDS

The 2019 campaign was the most successful year ever. 219 applications were submitted.



The ESICM Research and Industry Awards process was divided into three steps: pre-selection, the external assessors review and the jury meeting.

The jury (Research Committee members with potential external invited members) met in two sessions - pre-selection and jury meetings. Pre-selected submitted projects that had passed the scientific quality, methodology and budget reviews were sent to external assessors. Assessors were volunteers who expressed their interest to be part of our pool of reviewers to help us assess projects and can express their interest at any time using the link <https://www.surveymonkey.com/r/CallForReviewers>

This link is open all year long.

Assessors were selected according to specific criteria, among others academic and/or clinical experience, h-index, grant application experience and topic of expertise.

New this year, are the four GE Healthcare-ESICM Point of Care Awards and the Professor Burkhard Lachmann Award. Each GE Healthcare-ESICM Point of Care Award allocates €15,000 to projects related to the improved diagnosis and treatment of patients with Sepsis and a support loan of equipment (devices) for a total value of €50,000.

The Professor Burkhard Lachmann Award for Experimental Research (€5,000) will be given for the first time this year. The recipient has been selected among the Basic Research Award applications that passed the first review step.

The application and review platform have both been re-designed to allow for a smoother handling of such a vast number of submissions. For the first step, the applicant has to submit a short application in an abstract-like form. After pre-selection, 66 applicants were invited to complete the

full application providing extensive information about the research plan, methodology, etc. The full application was initially reviewed by 2-4 external reviewers before being assessed by the jury members.

A more systematic follow-up of the mandatory reports from the awardees shall be in place in the near future.

SURVEYS AND PROJECT ENDORSEMENT

Seven surveys have been endorsed this year, with over 12 applications in the pipeline: IRIS: Initial Resuscitation in Shock, CleanTBI Sedation management in patients with Traumatic Brain Injury: a survey of Intensivists and Neurosurgeons, IPAFLU: Influenza-associated aspergillosis survey, Automatic tube compensation practice in the ICU – ATC survey, The TRACE2 survey- Transfusion practice on the intensive care unit (ICU) in patients with active bleeding; an international online survey, PRACT-INF-ICU: Current Practice of infectious disease management in the ICU – International survey, Patient safety ESA ESICM survey.

The Surveys and projects endorsement Business Unit is working on a new, refined application form that shall be implemented after LIVES 2019.

The INACTIC project by the N&AHP 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. The progress report will be available through the N&AHP Committee.

TRIALS UPDATE

The trials activities continue to develop very successfully, both in terms of the number of ICUs participating in them and in terms of patient accrual. A little less than 50,000 patients have been included since we started with FENICE in 2013.

1. **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 first manuscript was submitted to ICM in June 2019.

2. **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 has been published in Intensive Care Med. 2019 May;45(5):592-600. doi: 10.1007/s00134-019-05567-4.

3. **TRAIN**: TRAnsfusion strategies in Acute brain INjured patients: is a prospective multicenter randomised 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. The TRAIN study has achieved its 35th month (August 2019). We have 59 centres included in the eCRF with ethical approval, with 44 being ACTIVE (around 75%). During the first 34 months, a total of 3,398 patients have been screened in the active centres; 420 patients (12%) have been eventually randomized. In the last month, 13 patients have been randomized.

4. **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. The data collection is closed and the analyses and data cleaning are ongoing. More than 12,000 patients were enrolled.

5. **PREVAKI**: 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, 14 centres have been given clearance to access the eCRF platform.

6. **VITDALIZE**: Effect of high-dose vitamin D3 on 28-day mortality in adult critically ill patients with severe vitamin D deficiency. The recruitment of patients within a selection of European sites started in August 2017. The study is proceeding well and we now have > 20 active centers in Austria and Belgium and, as of today, included 284 patients. UK and Germany have confirmation of funding, but it will still take a while before they will become active.

7. **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, 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 has already been validated in the eCRF platform. Data Cleaning is ongoing.

8. **ICU-CONSERVATIVE 02**: 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 2019 for a selection of ICU from Italy, France, United Kingdom and Spain.

9. **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 prospective studies. To date, 158 active sites localised in 41 countries in the world included 2,618 patients.

10. **EUROBACT2**: Epidemiology and Determinants of Outcomes of Hospitals Acquired Blood Stream Infections in the Intensive Care is a prospective observational multinational, multicentre cohort study. More than 325 centres have registered. The eCRF platform is set to open in September 2019.

11. **COBALIDATION**: A multicentre cluster randomised trial of 14 ICU Departments from 14 academic referral hospitals located in Spain. The participating ICUs are general medical and surgical ICUs accredited to train three new residents in intensive care medicine per year. Additionally, the study sites have been selected based on their research infrastructure, geographical diversity and proximity to simulation centers. The Cobalidation e-platform was set up in 2019 and basic simulation-based OSCEs have taken place.

12. **SANDMAN**: The SAndMAN study Sedation, Analgesia and Delirium MANagement is an observational study that will describe sedation, analgesia, and delirium strategies used in ICUs around the world. The study is endorsed by the

ESICM Health Services Research & Outcome (HSRO), Neuro-Intensive Care (NIC) and Peri-Operative Intensive Care (POIC) Sections. Registrations of centres is open. eCRF is under revision before its creation.

SYSTEMATIC REVIEW GROUP (SRG)

This last year the Systematic Review Group (SRG) led several projects:

- Creation of a preliminary online tool for presentation of live metanalyses within the ESICM website. A first version of the tool has been tested with unpublished data and has been demonstrated to work. The esthetic of the presentation still requires some finesse. The next stage of this project requires collaboration with publishers. This is currently being investigated with the understanding that the end-result should benefit three parties: the researchers, the publishers and ESICM.

- The forms for proposals for systematic reviews were updated and calls for Section-led systematic reviews were sent out twice.

The first call came out in January. Each proposal was assessed by two reviewers. There were more submissions than could be assessed by the members of the SRG. Therefore, additional experts in the field were recruited to assist in the assessment process.

Three proposals were selected in the first round and also underwent approval by the ESICM Executive Committee. These are progressing and will be presented at the SRG meeting in Berlin together with the support required.

The second call came out in August and proposals are coming in at this time. It has been agreed that methodologically sound metanalyses that are of potential interest will be submitted preferentially to ICM for review.

- Three additional projects are being moved forward under the auspices of the SRG. The first relates to ICU ethical practice and is in late stages of data extraction. The second relates to sepsis and is currently undergoing a preliminary literature search before protocol submission, as it may require several collaborations. The third has to do with the high flow nasal cannula and is being conducted in collaboration with the PLUG group and McMaster University.

Sharon Einav
Chair, SRG



More on
www.esicm.org/research/

Acute Kidney Injury (AKI)

The AKI Section faces a transition in 2019. The current Chair, Eric Hoste, and Deputy Chair, Marlies Ostermann, have both finished their three-year mandate serving the Section. After two terms, Eric now leaves room for others. Starting at the annual congress, LIVES 2019, Marlies Ostermann will chair the Section and Antoine Schneider will be the new deputy. I am very confident and excited that their leadership will stimulate new ideas and initiatives.

Last year we had the usual two Section meetings at the Society's annual meeting in Paris, and the ISICEM meeting in Brussels. As a novelty, this last meeting was in the ESICM headquarters in Brussels, very near to the ISICEM congress venue. Probably, because of this new location, not many of us were able to attend the meeting, which was of course unfortunate.

In June, we had the “**AKI as a syndrome**” **Lives Forum meeting in Nice, France**. This three-day meeting was co-organised with the MEN Section, and the programme offered a mix of lectures and hands-on workshops on topics concerning AKI, liver and pancreas. A big thank you to the whole ESICM Forum team, and especially Carole Ichai, for putting such great effort into making this meeting a success!

The Master Class on RRT, which is traditionally held during the annual ESICM meeting, was re-structured in 2017, and fine-tuned in 2018. Antoine Schneider, together with a team of enthusiastic AKI Section members, made a template on which we can build for the upcoming years. We are excited to announce that this has been accepted, and next year we will have an “expanded” two-day Master Class in the Brussels office. More news on this later.

In Paris in 2018, we had the first **Round Table on AKI** - a focus group on research opportunities for the section. The manuscript of this round table has undergone several rounds of revisions and will be submitted in October 2019.

E-LEARNING MODULES AND JOURNAL CLUB

The AKI Section is very fortunate to include two teams of enthusiastic AKI Section members who put great efforts into website-related matters.

The e-learning modules have been re-vamped under the lead of Miet Schetz and Marjel Van Dam and we are already in the process of updating the former PACT modules and exploring new initiatives.

Similarly, the Journal Review Club initiative is getting off the ground with the help of Barbara Philips, Ilona Bobek and Sebastian Klein.

RESEARCH

• PrevAKI

This 2016 Trials Group award winner with PIs Alexander Zarbock and Melanie Meersch from Münster, Germany, aims to evaluate the compliance rate of the use of a care bundle for prevention of cardiac surgery associated AKI. The study is near to completing recruitment of patients.

• STARRT-AKI

This prospective randomized study on accelerated or standard timing of initiation of RRT for AKI is initiated and run by Sean Bagshaw and Ron Wald. The AKI Section was involved from the onset of the project, which also resulted in the endorsement of this study by the ESICM Research Committee.

The study has completed its inclusion of patients. However, it is still collecting outcome data. Results will be probably be available in the late Spring of 2020.



Eric Hoste
Chair of the AKI Section

Marlies Ostermann
Deputy of the AKI Section

• REVERSE-AKI

is a project that came forth from the Spring 2017 AKI Section meeting. The objective 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 Suvi Vaara and Marlies Ostermann. The study is still enrolling patients in five centers.

ARF Section

The Acute Respiratory Failure (ARF) Section of ESICM is one of the largest sections, with more than 1,000 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 2018 conference in Paris and the ISICEM 2019 conference in Brussels. These meetings were very successful and had an active attendance and participation of numerous members. The Section collaborates in the drafting of the programme for the LIVES conference, and on the PG course-Masterclass 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 and after the first paper published in JAMA (July 2016), numerous sub-studies have been published so far in Intensive Care Medicine, American Journal of Respiratory and Critical Care Medicine, and other top critical care journals. The Section is currently involved, along with the Trials Group, in WEAN SAFE (Worldwide Assessment of Separation of pAtients From ventilatory assistance) a multi-centre, prospective, observational, four-week inception cohort study. Enrolment finished in May 2018. To date, data from approximately 10,000 cases from all over the world (gathered in more than 500 participating ICUs) have already been validated in the eCRF platform.

The PLUG working Group is an active working group of the ARF section. It is an international cooperative project that deals with applied respiratory physiology and 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 and also the International Conference of the American Thoracic Society in the United States), where scientific abstracts are discussed.

The PLUG, together with the ARF section and ESICM,

successfully organised a LIVES Forum in Madrid last year and a new course on advanced bedside respiratory monitoring will be held in November 2019 in Brussels. This course is already fully-booked.

Last, but not least, Dr. Hadrien Rozé and Dr. Fernando Suárez -Sipmann are the Section representatives for educational activities and together with Pr Claude Guérin and Pr Davide Chiumello, they are actively working with the DPD on a number of ESICM Academy activities.

Jordi Mancebo
Chair of the ARF Section

Luigi Camporota
Deputy of the ARF Section



Cardiovascular Dynamics (CD) section_ Section activities from October 2018 to September 2019

LIVES 2018 (PARIS)

- The major activity was for LIVES 2018 (Paris) with many sessions organised by our Section (in total 28 programme elements).
- Master Class: this year we ran a two-day pre-congress Master Class entitled "Septic Shock Management", which was organised jointly with the Systemic Inflammation and Sepsis (SIS) Section.
- Furthermore, there was a Master Class entitled "Basic course in Echocardiography", as well as an advanced course in echocardiography: LV systolic and diastolic function, RV function".

MASTER CLASSES (BRUSSELS)

- Hemodynamic Master Class: for the first time, the Section organised a two-day Hemodynamic Masterclass at the ESICM headquarters in Brussels (Feb 26-27, 2019), which was attended by 54 participants.

LIVES 2019 (BERLIN)

- The CD Section has proposed a programme including a one-day pre-congress Master Class (together with the NEXT section)
- Several members of the Section participated in the abstract selection process for scientific contributions to LIVES 2019. The Chairs participated in an abstract selection meeting and several Congress Committee programme meetings.

PUBLICATIONS

- The CD Section has published an "expert opinion paper" entitled Current use of vasopressors in septic shock (DOI: 10.1186/s13613-019-0498-7).
- The Echocardiography Working Group of the CD Section has published a review on Critical care echocardiography (DOI: 10.1007/s00134-019-05604-2).
- Several active members of the CD Section were also involved in the Awards selection process of the Society.
- Members of the section actively participate in the Journal Review Club (found on the "news" section of the ESICM website).

WEBINARS

- The Section held two webinars, one on The future of haemodynamic monitoring on January 21st, 2019 and one on How to use lactate in clinical practice on April 4th, 2019.

SURVEYS

- The Section has developed and performed two surveys on transfusion practice in the ICU (TRACE and TRACE II survey). TRACE I is accepted for publication.
- The section has agreed and submitted a paper on Metrology.

WORKING GROUP

- The Section has founded a new working group on Arterial mechanics and v-a coupling. 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

The 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. This will be an evidence-based Blood Transfusion Guideline, tailored for the intensive care patient. Part 1 will be on non-bleeding critically ill patients and is expected to be published in 2019.

Guidelines - 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. The group has been formed and the first meeting took place this year. The guideline is expected to be published at the end of 2020.

Research

• TRACE I survey

This is an international survey to understand transfusion practice in ICUs world-wide. 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. The results of the survey are now submitted for publication.

• TRACE II survey

This is a follow-up on the TRACE I survey. We will now focus on bleeding critically ill patients. The survey is expected to be online in Summer 2019.

Upcoming projects

• INPUT trial

This is an international multicentre 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). The study will collect during one week all transfusion data in participating ICUs. A pilot trial has successfully been performed. We are now recruiting centres to participate. Please contact the Transfusion Task Force Chair if you have any questions at a.p.vlaar@amsterdamumc.nl



Alexander Vlaar
Chair of the Transfusion
Task Force

Maurizio Cecconi
Co Chair du Task
Force Transfusion

Ethics [ETH] Section_

In 2018, the Chair (Rik Gerritsen, NL) and Deputy Chair (Christiane Hartog, GER) worked closely together and collaborated with the members of the Section to advance the issue of Ethics in the Society. We participated actively in preparing and shaping the Society's annual congress in Berlin. The Chair and Deputy Chair were not present at all the preparation meetings but prepared suggestions accordingly. We reviewed and selected the abstracts for the poster presentations. We both are in the last year of our mandate. Christiane is elected and will continue as Chair and Diederik van Dijk will take up position as Deputy Chair, starting in October 2019.

The enthusiastic participation of the Section's leadership resulted in a prominent presence of ethical issues during last year's congress. We had several interesting and well-attended sessions. But even more important there was a very lively interaction and discussion between faculty and the audience and among the members themselves during these sessions. Next to specific ethics sessions the members participated in more general session debates and Master Classes. During the annual congress, there was a very well-attended Section meeting where we discussed the goals and projects of the Section. Valuable contacts were established, which are essential for future projects and cooperation. The planned Section meeting during ISICEM was cancelled due to lack of attendance. This might have been due to the location, which was at the ESICM office and not at the ISICEM venue.

The Section has grown to over 400 voting members. The Ethics Section and its members are involved in numerous research projects, including ETHICUS II, led by Charlie Sprung (manuscripts published and in preparation) and the DISPROPRICUS project, led by Dominique Bennot, which has led to a publication in ICM.

The euroQ2 project led by Hanne Jensen and Rik Gerritsen has been published. Rik also got his PhD at Groningen University defending this project. Furthermore, the Section is involved in the Ethicus II Study (PI Charlie Sprung, former Chair of the Ethics Section), and the systematic review on palliative care interventions in the ICU (PI Victoria Metaxa) with several articles in review or planned. Ethics Section member (Christiane Hartog) won the first ESICM family partnership Award in 2018.

In 2017, the Section obtained the 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 Metaxa. The SR protocol has been submitted.

A very important statement on inter professional decision making in ICU was published in CCM (first author, Andrej Michalsen, former Chair of the Ethics Section)

The Section held a webinar on organ donation.

Colleagues from around the world use the ESICM Ethics Section as a platform for contact, reflection and research.

For the first time, the Section will organise a Master Class on end-of-life care and organ donation. And will be held in December 2019 in Brussels. In LIVES 2019, ethics is included in a day-long simulation training session (pre-congress Master Class).

In summary, the Section grows in membership and research activities, as does the activities and awareness among the critical care community, that intensive care means making choices and that ethics can support you make the right choices. We are confident that Christiane and Diederik will continue on this road.

Rik Gerritsen
Chair of the ETHICS Section

Christiane Hartog
Deputy Chair
of the ETHICS



HSRO section

Section chair: Dylan de Lange (NL)
Section Deputy: Michelle Chew (S)
Chair Working Group Quality and Safety: Dave Dongelmans (NL)
Chair Working Group Health Economics: Peter van der Voort (NL)
Chair Working Group Outcomes: Paul Zajic (AT)

In 2018/2019, the HSRO Section Chair and Deputy both participated in preparing and shaping the Society's annual congress in Paris and the upcoming event in Berlin. 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 outcome issues during the 2018 congress and there were several interesting and well-attended sessions.

Various sessions took place with a number of interesting patient groups to discuss outcomes and there were also sessions on the methodology of outcome measurement and benchmarking. Very importantly, the HSRO provides a podium for young researchers and health professionals to present their posters.

The HSRO Section has grown to over 4,000 members. Its members are involved in numerous research projects, including the VIP 2 study, the SAPS-3D initiative and the SANDMAN study. The VIP1 collaboration, which started in 2016, has resulted in an impressive 15 publications about very elderly patients in the last two years.

The HSRO section has participated in development of 4 e-learning courses that are currently being processed for internet application. The topics are: prediction of outcome, modelling outcome, predicting outcome and benchmarking.

ONGOING PROJECTS:

SEEIII study (project research responsible, Andreas Valentin)
Study inclusion has closed and analyses of the data are being performed. Results will be presented shortly.

Very Old Intensive Care Patients (VIP) project

This project started in 2016 with the first step, the VIP1 study. This project started in 2016 with the first step, the VIP1 study. Over 5,000 patients were recruited and more than 15 publications are now based on this research.

Despite the fact that the VIP1 study answered many questions on the outcome of very old ICU patients, some questions remained unanswered. For this reason, the VIP2 study was started in 2018. At present, the inclusion of new patients is complete and the follow-up period (6 months survival) is almost finished.

This study tries to answer if comorbidity and physical functioning prior to admission are more important for survival chances in very elderly ICU patients.

More than 3,800 patients acutely admitted elderly patients have been included throughout Europe.

QoR-ICU

This study looks at the quality of recovery after ICU treatment. Members of the HSRO are participating in Delphi rounds for consensus making on selection of variables, parameters and outcomes.

SANDMAN

Multinational observational study into the sedative and analgesic usage and outcomes. The protocol has been finalised and ethical approval is being sought.

SAPS-3D

This new study aims to provide a score that predicts death and re-admission after ICU discharge. The study protocol has been discussed in various research meetings and the study will start soon.

LOGIC - Linking of Global Intensive Care Registries (LOGIC)

This study is trying to find common ground in all registries and to propose a minimal set of data entries that is needed to compare and analyse the ICU patients in different countries throughout the world.

LIVES 2019

The HSRO Section will hold its annual section meeting, as well as various research meetings, at LIVES 2019. Interested intensivists are very much invited to attend, or to become a member of our Section.

We hope to meet you soon!

The HSRO-section



Dylan de Lange
Chair of the HSRO Section

Michelle Chew
Deputy of the HSRO Section

Infection Section

The INF Section has been busy in recent months and this report summarises our activities.

We will be holding two thematic sessions at the 2019 LIVES meeting in Berlin: 1 Clinical Challenge session and several joint sessions with, among others, the Data Science, SIS and ARF and AKI Sections. We will also be holding an INF Section meeting, to which you are warmly invited.

In May of this year, we delivered a new Master Class in Brussels on Sepsis and Severe Infections, in collaboration with the SIS Section, and will be delivering another Master Class during the weekend preceding LIVES 2019 in Berlin.

The Section endorsed five surveys over the last six months. Many thanks to all those who took the time to complete them. The surveys included: Management of infections in the ICU - Ashraf Roshdy (UK); Management of respiratory viral infections in the ICU - G Voiriot and Q Philpott (FR); Survey of ICU structure across multiple countries - Armand Mekontso Dessap (FR); IPAFLU survey of aspergillus after influenza - Joost Wauters, Michelle Holtapples (BE) and Frank Van de Veerdonk and Paul Verweij (NL).

The INF Section has a number of ongoing **Clinical Studies**, including:

DIANA (antibiotic de-escalation) - Jan de Waele (BE). Data collection is complete and will be presented in Berlin at LIVES 2019.

EURECA (encephalitis)- update from JF Timsit (FR). 400 cases enrolled, dominated by French units (80%).

The aim is to prolong this study to June 2019 and to bring more countries on-board (including Brazil and Portugal). The participation of further countries is being sought and, if further countries come on board, it may be possible to prolong this study.

BLING 3 (continuous vs intermittent beta-lactams) - Jeff Lippman (AUS). This study is ongoing and due to be completed in 2022.

Studies which are currently under development include:

EUROBACT II - led by JF Timsit (FR). 50 countries have been identified, with 200 centres recruited so far. The aim is to start in June 2019, but for countries with slower approval, a later start is possible. Proposals for suggested analyses are invited and a database will be open for this purpose.

AURORA - led by Jan de Waele (BE) - is an annual survey of antibiotic resistant organisms. Intended recruitment will start late 2019.

An important aspect of our Section's work is guideline development. Alexis Tabah (AUS) and J Garnacho-Montero (Spain) are leading a joint ESCIM/ESCMID guideline concerning Antibiotic de-escalation, which is nearing publication.

Also under preparation are the guidelines on:

Therapeutic Drug Monitoring (joint ESICM, ESCMID, IATDMCT and IAT led by J Roberts)

Pneumonia (D Koulenti) MDR infections (with ESCMID) and Severe CAP (with ERS).

Antibiotics Working Group

We welcome the recently-elected Chair, Hendrik Bracht, who is leading the work on an Antibiotic Stewardship Master Class and conducting the major INF Section-endorsed A-TEAM study, which is ongoing.

Pneumonia Working Group

The Chair, Despoina Koulenti, is leading the 'Pneumoinspire study'. 1500 patients have been recruited and the aim is to end recruitment in June 2019.

Further studies include:

The ALL-ICU study of lung antibiotic levels (a joint project with the Antibiotics Working Group). Funding has been secured for sample analysis as part of an NHMRC (AUS) grant.

The HAP2 Study (led by Antoine Roquilly (FR). The results of the second stage application are awaited. If successful, the projected start date is January 2020.

Education - Saad Nseir (FR)

A webinar on fine-tuning antibiotics was delivered in October 2018.

Two eLearning modules have been completed (Pyrexia, Infection control) and a third is under revision (antibiotics).



Jan de Waele
Chair of the Infection Section

José Garnacho Montero
Deputy of the INF Section

MEN section 2018-2019_

Metabolic, endocrine and nutritional (MEN) components are present in any ICU pathology: when well handled, nutrition is the fertilizer of all other therapies. It requires however, an understanding of the different organs involved in the metabolic responses, and how best to integrate them into other organ failures in the critically ill.

The MEN Section aims at improving these views. The Section has five working groups that promote specific aspects of both education and research: Gastro-Intestinal (GI) function (Leader Annika Reintam-Blaser (ARB)), Education (Leader Joel Starkopf (JF)), Liver-Pancreas (Leader Valentin Fuhrman (VF)), Micronutrients (Leader Michael Casaer (MC)), Muscle (leader Stefan Weber-Carstens (SWC)).

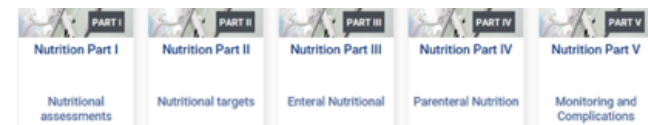
Two meetings were held during LIVES 2018 in Paris and the ISICEM 2019 congress in Brussels. Sub-Section meetings took place on both occasions (Liver and GI).

Two surveys were sent to Section members. The first in January 2019, to identify the members of the Section who wanted to participate actively in different activities. 54 members confirmed their readiness to contribute. The second in May, to identify potential interest/participation in the Phosphate Prevalence survey. Over 50 potential participating centres completed this survey.

EDUCATIONAL ACTIVITIES

• Academy courses

An enormous effort was made by the Education team (led by JS) to elaborate five e-Modules dedicated to Nutrition (Assessment, Targets, Enteral, Parenteral Nutrition and Monitoring). These complete the Abdomen, Acute Liver Failure and Pancreatitis modules.



• Lives Forum, Nice: AKI as a Syndrome, 6-8 June

The MEN section, and particularly past MEN Chair, Carole Ichai, participated in the elaboration of the Forum, along with the AKI Section. Interactions between kidney and liver failure were explored.

• Lives 2019 Berlin

The concept of the programme has been completely reviewed. As usual, the MEN Section members have participated in the abstract reviewing and programme process. In 2019, the Section is attempting to go transversal and interdisciplinary, with fewer "pure-MEN" sessions, and more collaboration with other Sections, such as AKI, NAPH, and ARF.

There will be two unplugged hands-on sessions on indirect calorimetry and ultrasound. High- quality abstracts were received and there will be three poster sessions, and one oral. Feedback from our members will be especially important.

• Master class

There will (on purpose) be no "solo" Master Class for MEN this year, but instead, collaboration with AKI.

RESEARCH ACTIVITIES

The Micronutrient Practice survey was successfully completed and presented as a poster at ISICEM 2019. It revealed very variable practices regarding prescription and administration of vitamins and trace elements. The team is finalising the manuscript related to this survey.

VITDalize trial is now recruiting in > 20 centers in Austria

and Belgium (>320 patients, target 1,200 for interim analysis, 2,400 for the full study). The UK and Germany receive separate funding from NIHR and BMBF and presumably start recruiting at the end of 2019.

The iSOFA study is finished and data analysis is currently being processed. 540 patients from 11 sites worldwide were included in the study and biomarkers were measured in five sites (224 patients). The results of the dynamics of serum citrulline and I-FABP will be presented as abstracts at ESICM LIVES 2019.

In order to improve and orient future research in Metabolism and Nutrition in a constructive way, a research agenda has been developed and submitted for publication. The effort of 25 members of the GI Working Group was co-ordinated by ARB.

The MEN Section was awarded support for a Systematic Review on Hypophosphatemia: the project ranked 2nd out of 16 submissions. There will be two parts: a point of prevalence survey and a systematic review.

We take this opportunity to thank Pr. Carole Ichai, past Chair of the Section, for all the project initiations. We would also like to thank the very active members of the Section.

Mette Berger

Chair of the MEN Section

Valentin Fuhrman

Deputy of the MEN Section



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 last year of Fabio Silvio TACCONE (Brussels, Belgium) as Chair; Lara PRISCO (Oxford, UK) has unfortunately left her position of Deputy, and Chiara ROBBA (Genova, ITALY) has been elected as her successor.

Two Working Groups are active within the Section: the first one on « Multimodal Neuro-Monitoring», which is led by Raimund HELBOK (Innsbruck, Austria), aiming to promote research on the use and relevance of Multi Modal Monitoring (MMM) in neuro intensive care.

A project on the definition of metabolic alterations during acute brain injuries is currently ongoing and will be finalised during 2020.

The second Working Group focuses on «Epidemiology and Neuro

Prognostication » 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 centres and potentially develop clinical interventional trials on "burning" questions, where a knowledge gap exists.

The NIC Section will play an active role in the SANDMAN study, which will describe sedation strategies in critically ill patients, including those with primary brain injury and which has been endorsed by the ESICM Trials Group. Furthermore, the Section's participation in the SYNAPSE-ICU Study (ICP monitoring) has been relevant.

Geert MEYFROIDT has been appointed as the new Chair of the Section; the leader of this Working Group will be defined at the next meeting.

A third trans-sectional Working Group on Delirium has been recently created; Romain SONNEVILLE represents the NIC Section in this group (Chair: A SLOOTER). A consensus paper on delirium definition and management is currently ongoing, with the involvement of two NIC Section members (T Sharshar and N Latronico).

EDUCATIONAL ACTIVITIES

• LIVES 2019

The NIC Section is well represented and obtained several slots at LIVES 2019. For the first time, the Neuro Lab will be present during LIVES2019, focusing on non-invasive neuromonitoring. The Master Class on managing acute neuro-emergencies will also be part of LIVES2019.

• Future projects

Several consensus projects are ongoing:

- Consensus on processed EEG monitoring of Sedation in critically-ill patients (Frank RASULO)
- Fever and temperature management in brain injured patients (Raimund HELBOK and Fabio S TACCONE)
- Management of the Respiratory System and Mechanical Ventilation in Patients with Acute Brain Injury (Robert STEVENS and Chiara ROBBA)

ONGOING RESEARCH ACTIVITIES

• Updated algorithm for the management of Severe TBI

Different members of the NIC Section have been involved in this great consensus meeting, held in Seattle, which will result in a new and comprehensive algorithm to manage severe Traumatic Brain Injury (TBI) patients. The manuscript will be submitted before the end of the year to Intensive Care Medicine.

• Transfusion strategies in acute brain injured patients: TRAIN Study

The TRAIN study, supported by an ESICM award of 50,000 Euro, is a multicenter 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 hemorrhage and intracranial hemorrhage). The study has now completed the second year of inclusion and, at the moment, 60 recruiting centres have screened more than 4,000 patients and randomised more than 430. The PI of the study is Fabio Silvio Taccone (Brussels, Belgium).

• Survey on respiratory management of acute brain injured patients

The survey has been completed. The PI is Chiara ROBBA. The study will be presented as an abstract at LIVES2019.

Brain ultrasonography consensus on skill recommendations and competence levels within the neuro-critical care setting
The Section has contributed to this consensus paper, which has

been published in Neurocritical Care. The leaders of the projects are Frank RASULO and Chiara ROBBA.

• eLearning platform and Education

The NIC Section is contributing to the development of "neuro" topics for the e-Learning platform within ESICM and four new modules have been completed.

• TBI collaborative study group

This is a multicenter 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 was submitted for publication. A second study on diabetes insipidus is already accepted.

New manuscripts are coming.

NIC SECTION PROJECTS

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) - SYNAPSE-ICU (Giuseppe Citerio, University Milano Bicocca – Ospedale San Gerardo); 2) Extubation in Neuro-ICU patients and Outcome. The ENIO Project. A Multicentre International Observational Study. (Karim Asehnoune, CHU Nantes); 3. EuRECA The EUropean study on meningoEncephalitis in intensive CAre study (Romain SONNEVILLE, Paris, France).

The next meeting of the NIC Section is scheduled during the ESICM LIVES 2019 in Berlin.

Fabio Silvio Taccone

Chair of the NIC Section

Lara Prisco

Deputy of the NIC Section





Peri-Operative Intensive Care (POIC) section_

EDUCATIONAL ACTIVITIES

- Section members further developed The European Intensive Care Curriculum (EPICC) as a part of the new e-learning Academy. Five more modules are currently about to be finalised.
- Last Spring, we ran for the first time the European Perioperative Intensive Care Curriculum Master Class in the Training Centre in Brussels. The main objectives of this Master Class are to understand the place of ICU in Perioperative Medicine, review major perioperative complications, learn how to implement efficiently a perioperative pathway for high risk surgical patients and focus on simulation and hands-on sessions.
- During the Master Class, we employ techniques that encourage maximum learning through participation and knowledge retention. This is achieved by avoiding frontal lectures and offering possibilities for a lot of interaction between the participants. The course was fully booked and the evaluation of the Master Class was the best of all Master Classes at that time. We developed the educational content in close collaboration with Melania Istrate from the ESICM office. A new EPICC Master Class will take place in Spring 2020 in Brussels.
- The Section contributed to the composition of the scientific programme of LIVES 2019. A postgraduate course on Delirium Management will take place during LIVES 2019 at the Berlin Delirium Simulation Centre. This will be in close cooperation with the Department of Anaesthesia and Intensive Care of the Charité University Hospital, Berlin.

RESEARCH ACTIVITIES:

- The Section Deputy Chair supported and coordinated activities of the ESICM Research Committee. Two proposals were sent to the Systematic Review Group this year.
- An international observational trial about postoperative vasopressor usage is being run by POIC members. ESICM

and the European Society of Anaesthesia (ESA) are collaborating in this trial to use common synergies. There are currently 400 hospitals from 38 countries participating and we expect to include >40,000 patients. Results of an online survey performed before the start of the study will be presented during LIVES 2019.

- The Section recently generated a cross-sectional working group in cooperation with the HSR0 and NIC Sections. It focuses on Delirium and Long Term Outcome (DeLTO). The first meeting took place at LIVES 2018. Several research projects and consensus statements are already planned within this working group.
- A joint meeting with members working with intensive care registries from the HRSO and POIC section took place in March in Brussels. The aim is to agree on common registry variables to enhance and ease cooperation of registries beyond national borders.

Ib Jammer
Chair of the POIC Section

Aarne Feldheiser
Deputy Chair of the POIC Section



SIS section_

Two regular meetings of the SIS Section took place during LIVES 2018 and ISICEM 2018. Prof. Marc Leone was this year elected Deputy Chair of the Section.

LIVES

The Section played a significant part in the composition of the scientific programme of LIVES 2019. The Section also organised a PG course on sepsis during LIVES 2018.

RESEARCH COMMITTEE

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.

ACADEMY

The Section has assisted the e-learning Committee by updating the Academy e-learning modules relating to Sepsis and MOF. Academy modules from the SIS Section continue to be well-received, with the Sepsis and Septic Shock module the third most completed module in the Academy to date. Even more exciting, these modules are being adapted in order to be part of the Academy application for credentialing by UEMS (for CEUs)

MASTER CLASSES

The Master Class on the Management of Sepsis was successfully provided at the ESICM training centre in April 2018 and feedback from the delegates was very positive.

WORLD SEPSIS DAY

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.

SURVIVING SEPSIS CAMPAIGN

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.

ALIVE

SIS Section members are actively contributing to the ALIVE Initiative (sepsis education in resource limited settings).

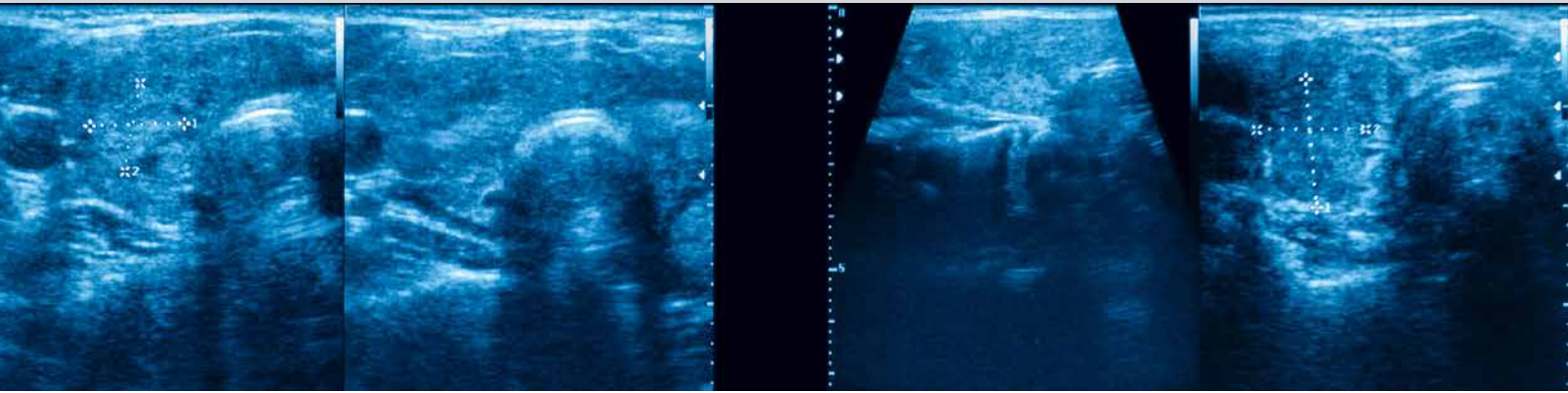
NEXT

The SIS Section has also collaborated on a number of the NEXT Committee's activities, such as the NEXT Fellowship on 'Infections in ICU'.

Yasser Sakr
Chair of the SIS Section

Massimo Girardis
Deputy of the SIS Section





Trauma and Emergency Medicine (TEM)

The societal year 2017 (October 2017 until September 2018) consisted of preparation for the TEM programme at ESICM LIVES 2018, one webinar about Damage Control Resuscitation in Trauma, and the submission of a new e-learning programme on Trauma Care.

Two meetings were held during LIVES 2017 in Vienna and ISICEM 2018 in Brussels.

The TEM Section actively contributed to the scientific programme of the upcoming ESICM LIVES congress in Paris in September 2018. The programme will include three thematic sessions, two clinical challenges sessions, two joint state-of-the-art sessions (one with the European Resuscitation Council (ERC) on "State of the Art in Cardiac Arrest Management", and one with the European Society of Anaesthesiology (ESA) on "What's hot in Trauma Management"), and one live interactive debate.

Together with eight full abstract sessions (three oral, five poster sessions), the TEM Section will host 16 sessions, including cardiac arrest management, trauma care, burns and poisoning.

We are sure that the programme will be very valuable for ESICM members interested in all kind of emergency medicine.

Last year, the TEM Section worked on a module on Trauma Management within the EPICC (European Perioperative Intensive Care Course), which is an interactive course based on e-learning. Altogether, 19 authors/reviewers from six European countries contributed to the module, which was finally submitted in August 2018 and will soon be online. The work was edited by Sofy Hamada from Paris, France, together with Kjetil Sunde (Oslo, Norway). Trauma surgeon, Luke Leenen, from Utrecht, Holland, provided helpful inputs to the revision process and the TEM section would like to thank all contributors for their great work.

In February, a webinar on Damage Control Resuscitation in Trauma was organised, with Sofy Hamada as the presenter and Luke Leenen as the Chair. In addition, the Section will also host a Trauma Masterclass in Brussels from 27-28 November 2018, chaired by Jacques Duranteu, with invited European trauma experts from France, Belgium, Holland and Norway as the faculty.

Several clinical studies by Section members within our area of interest have been published in 2018, or are ongoing. One large study should be mentioned in particular, the PARAMEDIC II trial (<https://www.ncbi.nlm.nih.gov/pubmed/30021076>). This double-blind controlled trial randomised more than 8,000 adults with out-of hospital cardiac arrest (OHCA) to receive epinephrine i.v. vs. placebo. Epinephrine use resulted in a significantly higher rate of 30-day survival than placebo, but there was no significant between-group difference in the rate of a favourable neurologic outcome because more survivors had severe neurologic impairment in the epinephrine group. So, there are still no drugs that have proven to improve neurologically intact long-term survival in OHCA. It should be noted that the overall survival with good outcome was very low (around 2 %).

In addition, two multicentre-RCTs on post cardiac arrest management, the TTM-2 trial, comparing TTM33 Cvs. fever control only, and the TAME Cardiac Arrest trial, comparing normocapnia vs. mild therapeutic hypercapnia, are both enrolling patients worldwide.

The TEM Section aims to become further multidisciplinary in the future, with a major involvement of young collaborators. Representation of the female gender is welcomed and TEM Section members, are also encouraged to be active in suggesting topics and speakers for future conferences/ Master Classes.

Future activities of the Section will include preparation of more webinars. Possible topics include an update in cardiac arrest management (with special focus on drugs), extracorporeal CPR, burns and acute poisoning.

Kjetil Sunde
Chair of the TEM Section

Claudio Sandroni
Deputy Chair of the TEM Section



Global Intensive Care (GIC) Working group

The past year has been another exciting, productive and meaningful year for the Global Intensive Care Working Group of ESICM. Membership numbers have continued 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 23 October 2018 in Paris, France, and at the ISICEM Conference in Brussels on 20 March 2019 (meeting held at the ESICM Brussels Office). Several teleconferences, communications and telephone calls were also held during the year pertaining to projects, collaborations, papers, initiatives, and for support purposes. The nine published papers previously alluded to in last year's GIC WG annual report and covering important recommendations and suggestions for sepsis and intensive care management in resource limited settings - the bulk with additional on-line supplements - are now increasingly cited and downloaded. They have also been incorporated into a book "Sepsis Management in Resource Limited Settings", which has been made available as an open access book, so that all interested can download the chapters, or complete book, for free. It is available at <https://rd.springer.com/book/10.1007/978-3-030-03143-5>. 29,000 downloads are already recorded since the release of the book earlier this year! This is indeed a marvelous achievement. A hard copy of the book is also available. 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.

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 papers were accepted for publication in journals such as Intensive Care Med, J Crit Care, JAMA, Ann Inten Care and Eur J Clin Microbiol Infect Dis amongst others. The unique book "Clinical Examination Skills in The Adult Critically Ill Patient" - to which various members of the group contributed - was published towards the end of 2018 and has received wide acclaim, as well as being acknowledged as filling a void in intensive care medicine. Working Group members were also involved in two initiatives by our Society - one on fluid administration, and one on antimicrobial resistance (in collaboration with ESMID). Both have now been published in Intensive Care Med. Various Working Group members are also currently involved in two invited reviews for Intensive Care Med - planned for publication towards the end of 2019.

Additionally, excellent work by members and the group has also occurred with respect to telemedicine, nursing projects and initiatives, the iCertain project, that has had meaningful impact in many regions of the world, and involvement in the Ebola outbreaks. Interactions with various organisations, including representatives from WHO, World Anaesthesia Society, Emergency Medicine Special Interest Groups, African Sepsis Alliance, African Research Collaboration on Sepsis 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

DecubICUs study, TOTEM study and the Isorea survey, has also been facilitated by the group. Aspects of the TOTEM study have recently been published.

The next Surviving Sepsis Campaign guidelines, which is currently being addressed, has group members as part of the panel. Several members have delivered extremely well-received talks at the Congresses around the world. A major focus of the group has been the development of the course content for the ALIVE Sepsis project, which was announced at the ESICM Lives Congress in Paris in 2018. The course is an absolutely unique and exciting initiative! Following the announcement, 16 theoretical modules have been prepared together with associated PowerPoint presentations. These have been independently reviewed and were available on time for the first course, which was held in Kampala, Uganda in June 2019. To have achieved this in less than one year was a simply remarkable feat by a truly committed team and group! The contributions were simply fantastic and massive thanks is extended to all the contributors, reviewers, Academy staff and Nathan Nielsen for the sterling efforts in achieving and helping to facilitate this within the designated time frame. A personal thank you to Martin Dünser for his magnanimous contributions and support, to Nikolas Styliandes for his great work in facilitating the web electronic conversions and formatting, to everyone who helped in many ways, as well as to the Society for their ongoing and unstinting support.

The first course in Uganda was an absolute success, with outstanding interaction and discussion taking place after every single lecture, all of which were delivered in exemplary fashion, and the enthusiasm, lessons and ambience was truly electric. The same experience emanated from the clinical component of the course, which is a unique and distinctive aspect of the course. A special and humble thank you to our Ugandan hosts for this super meeting and their wonderful hospitality!

Future courses are planned and confirmed into 2020. Additionally, extensive work has been done with respect to the development of guidelines and standard operating procedures for the course - administrative, local faculty, international faculty, hosts, administrative issues - to ensure delivery of the course at the most optimal level. As far as we are aware, nothing like this particular course currently exists and there is little doubt that this is a very special and meaningful venture!

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

Warmest regards
and very best wishes

Mervyn_Mer



Introduction by the President & President-Elect

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ACTIVITIES OF THE ESICM: DIVISION OF PROFESSIONAL DEVELOPMENT_

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 CoBa Faculty/CoBa Forum
- The Editorial & Publishing Committee

The DPD has had a successful year, with excellent progress made on the ESICM Academy and the establishment of the Master Classes. This has been facilitated with strong engagement from our members, DPD Committee and Scientific Section Chairs and members, and other key stakeholders.

In response to our members' feedback from the educational needs assessment undertaken in 2018, we have focused on making ESICM educational activities accessible, affordable and relevant.

In the last 12 months, we have offered 26 educational grants for candidates from Low and Middle-Income Countries and trainee intensivists to attend our Master Classes in Brussels. We have worked to diversify our portfolio of Master Classes and on-line educational material, focusing on the use of state-of-the-art educational methods, assessment tools and technology.

The Examinations Committee__

The Examinations Committee has been successfully running EDIC Parts I and II. 806 candidates sat the EDIC Part I exam in Autumn 2018 & Spring 2019 (theoretical part) in five different centres in Europe and two large centres outside Europe (India and Dubai).

332 candidates sat the EDIC Part II exam in Autumn 2018 and Spring 2019. In recognition of the high standards of the EDIC exam, the number of candidates taking the EDIC I and II exams have remained stable in 2018/2019.

Finally, at LIVES Berlin, we plan to award the three best candidates for the EDIC Part I and II exams. The winner of each category will receive free entry to LIVES 2020.

E-Learning Committee__

The e-Learning committee (ELC) once more had a busy and productive year. The new work stream focused Business Units (BUs) enabled Phase-1 development to gain further momentum and this is now approaching completion well ahead of schedule.

The Editorial BU, using new streamlined editorial processes, as well as strengthened collaboration with sections, authors, reviewers, and sub-editors produced a "tour-de-force". The ACE (Academy Critical care Education) courses are enabled by constant development of self-assessments and Scenario-Based Assessments by the Assessment BU and supported by the Curriculum Mapping BU. Phase-2 development has

started (see below). Collaboration with other groups within the DPD and wider ESICM has been strengthened. Gaining accreditation of the learning material is close to realisation.

ACE Courses Phase-2__

Thirty-six e-Courses, re-named ESICM "ACE courses", were published by the time of LIVES 2018. The final application for UEMS accreditation of the ACE courses was prepared by the ELC Editorial Board. It will be submitted in June 2019.

Four larger ACE courses were re-edited to conform to the new style and with the UEMS requirements. Each course will carry 1-3 Credits based on hours of student effort. There are more ACE courses in Phase-2 than in Phase-1. Each course is more focused, better mapped to CoBaTrICE and has EDIC-style assessments to facilitate exam preparation by candidates.

To ensure consistency of standards moving forward, authors are now further supported by a new course prepared by the Editorial Board. The "Guide for Authors" allows easy access to the author supporting documents, including writing house style and the Editorial Board SOPs, together with 7 "How to" videos on topics ranging from writing Intended Learning outcomes to writing MCQs.

ALIVE Course__

The Academy embraces the ethos of making high-quality, evidence-based, learning materials available to our colleagues working in resource-restricted environments. The Global Intensive Care (GIC) Working Group has developed a new blended course on Sepsis to be delivered in Low and Middle Income Countries (LMIC). This initiative is supported by the ALIVE Fund and will be hosted on the Academy. This course has been transcribed on to the Academy and will be available for the first workshop in June 2019 in Uganda.

Developing an e-learning environment specifically catering for the clinical, organisational and IT infrastructure challenges of LMIC, in close collaboration with colleagues working in those environments, is an exciting initiative. CM initiative.

ELC Assessments BU__

The CTC, EDIC Exams Committee and ELC collaborated on an MCQ Writing Workshop for members of the Assessments BU and the Editorial Board in March 2019. This further developed knowledge and skills in developing high-quality, EDIC standard assessments for inclusion in ACE courses and self-assessment.

Technical Developments__

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

Some specific developments include: Single Sign On (SSO) and Identity Management for the ESICM Site (all ESICM members can now use one account for all services and enroll themselves into ACE Courses), Mobile App for Android and Apple published for Moodle version 3.4. The updating to Moodle 3.6 is also under way. It also includes the new Academy Theme development (based on ELC requirements), Academy Servers (Directory Service + SSO) Upgrade, Academy

Learning Management System (LMS) upgrade, Academy Course Format Development (based on ELC requirements) and Design and Specification of the Certification Solution (once agreed, it will be developed and applied online). There was invaluable support for the development of the "How to" instructional videos on the "Guide to Authors" course.

The ELC embarked on a project with the Systematic Review Group to enable collaboration between SRG members using Academy infrastructure, real time visualisation of systematic review results aiming towards immortal systematic reviews, showcasing the work of the SRG and incorporating their output into the learning material of Academy.

The ELC and the Scientific Committee started a collaboration in the planning of an exciting new guided blended teaching programme in research methods. This programme will be led by the Scientific Committee and hosted on the Academy. The Technical Team will present plans and a schedule for the next phase of technical development, support and maintenance at LIVES 2019.

Clinical Training Committee__

The Clinical Training Committee (CTC) is primarily responsible for the development of educational courses/Master Classes for the Society. The focus in 2018-19 has been the ESICM Master Classes held at the ESICM Head Office in Brussels. The Master Classes are 2- to 3-day interactive 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 European Union of Medical Specialists (EUMS) and compliant with MedTech Ethical Business Practice. The courses benefit from a diverse multi-professional faculty.

Master Classes run this year have included: Haemodynamic Monitoring, The Art of Trauma Care, Sepsis and Severe Infections, Mechanical Ventilation: State of the Art, Life-threatening Emergencies in the ICU, and several new courses have been launched: Advanced Bedside Monitoring, Peri-operative Intensive Care, and End-of-Life Care.

The EDIC I and II Preparation Courses continue to be popular with courses run in India, Brussels and ESICM Berlin LIVES, with over 300 candidates enrolled in these preparation courses this year.

The 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 (EDEC) is now well-established, with a competency-based curriculum, logbook, webinar series and final exam for those candidates who wish to extend their critical care echocardiography competencies to an advanced level. There have been 146 candidates who have registered for the EDEC since 2016.



Finally, we have launched a POCUS initiative (Point of Care Ultrasound) this year. The POCUS Working Group has been created with the aim to develop learning resources and agree on core competencies for basic critical care ultrasound. The group's vision is to work towards a unified curriculum and accreditation pathway for basic critical care ultrasound.

The CoBaFaculty and CoBaForum

The task of the CoBaFaculty is to maintain, promote and develop the CoBaTrICE programme on behalf of the ESICM, 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 on the ESICM website.

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 to ensure 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.

This is my last year in office as Chair of the Division of Professional Development and I would like to take the opportunity to thank my colleagues in the DPD Committee and ESICM office, who have worked tirelessly to promote education and training for the Society. I would like to particularly 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 Franki Duška (Chair of the Clinical Training Committee), Melania Istrate (Learning and Development Project Lead), Dr Christian Sitzwohl (Chair of the EDIC Committee), Dr Ignacio Martin-Loeches (Chair of the CoBaFaculty) and Dominique De Boom (EDIC & EDEC Coordinator). Without their dedication and commitment to the educational activities of the Society, we would not be here today.

Finally, I would like to welcome our new Chair of the Division of Professional Development, Dr Franki Duška. Franki and I have worked on a number of educational projects for the Society over the years and, under his excellent leadership, I believe the DPD will continue to grow and provide high-quality education and training that is key to the future of the Society.

Pascale Gruber
Chair Division of Professional
Development



2. Communication Committee

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

Communication plays an essential role in the Society's transfer of information both to and from our intensive care community, whether to announce important news, results of clinical research, the publication of reviews, guidelines, recorded interviews, online learning, live webinars, or simply to raise our public profile.

Both the website and social media streams act as a daily portal for intensive care and related medical professionals to access both educational and scientific content. Our social media outreach is expanding and we currently have 25,311 followers on Facebook, more than 18,600 on Twitter, 8,243 on LinkedIn and 2,200 members of our LinkedIn discussion group.

We will be launching at LIVES, a new webpage on our website dedicated to patients and their families. This will provide practical guidance and information to help them understand how an intensive care team functions and what they can expect to find in ICU. This webpage will evolve over time, but is a very important and effective means to communicate externally with our patients.

The Journal Review Club (EJRC) continues to provide regular, up-to-date article reviews of wide-ranging research, selected from papers published in our official journal, which we then share with our members on behalf of the ICM journal. Our thematic e-newsletters include information about membership, elections, webinars, Master Classes and conferences. Because of the numerous activities carried out throughout the year, the ESICM President has decided that our members should also receive an update of the Society's news and collaborations with other medical societies. For this purpose, a new e-newsletter, "The President's Voice" was created, and this is now part of our written communication and circulated on a quarterly basis.

One of the Society's major achievements was in June of this year, when the 2018 Journal Citation Reports (JCR) were released. ICM's Impact Factor rose once more, to 18.967, ranking it second among the 33 medical journals in the critical care category and the most highly-ranked journal in this category entirely devoted to critical care. Our thanks go to the talented authors who submit their research to the journal, our committed reviewers and editorial team under the leadership of Giuseppe Citerio, and former Editor-in-Chief, Elie Azoulay.

Our second successful journal, ICM Experimental, is waiting for its impact factor, which should be released early next year. The growing number of submissions and citations over the past year is evidence of the quality of its articles and the reputation of the journal, and we have the editorial board to thank for the journal's overall development. ICMx has become the platform, not only for the ESICM LIVES abstracts, but also the INSPIRES symposia.

The Society's Social Media (SoMe) Task Force will be an instrumental part of our communications during LIVES and will be moderating many of the sessions using Twitter, and interacting with presenters, interviewing many of our keynote and Hot Topic speakers, as well as those presenting and publishing ground-breaking clinical research.

Without the efforts of the members of the Communication Committee, 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 those who helped us to achieve so much this past year.

Jacques Duranteau
Chair of the Communication
Committee



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NEXT- Report 2018-2019_

In 2018 and 2019, NEXT remains a prosperous part of the European Society of Intensive Care Medicine that aims to represent young members of the Society, and make ESICM an attractive place for trainees and young specialists. Since its introduction at LIVES 2012 in Lisbon, a lot has happened, and we are now moving towards the third term of the Committee that also goes along with a change in the leadership.

The NEXT Committee continues to drive innovation and creativity, and meet the dynamic needs of a modern medical Society. We are proud to be one of the most active parts in the Society, representing a significant portion of ESICM members. Aside from enabling virtual and real mobility across Europe, NEXT creates a congress track that is particularly interesting for young specialists and trainees, awards research grants, and is involved in nearly all facets of the ESICM. In the past year, NEXT has conducted a second round of the Mentoring Programme, a new Hemodynamic Fellowship, a scientific contribution to fair and equal evaluation of candidates in the light of the Diversity-campaign, and a brand-new service for the congress - to share a room or couch during the annual congress.

Organisational

LEADERSHIP_

The NEXT Chair, Björn Weiss (Berlin, Germany), steps down in October 2019 after two successful periods. After 7 years in the

NEXT Committee and a founder member of the Committee when it was established, Björn served in the Congress Committee, chaired NEXT, was an ex-officio member of the Executive Committee, the Council and became Chair of the Diversity Task Force.

The incoming Chair of the Committee, and Björn's successor, is Stefan Schaller from Berlin, Germany. In the upcoming year, the Committee will be steered by Stefan Schaller (Chair) and Laura Galarza (Deputy Chair). The new Chairs will ensure that the Committee remains the voice of the younger members of the ESICM, and to help shape the future of intensive care medicine.

SUMMER SCHOOL_

The Brussels Summer School is the heart of the NEXT Committee's activities, where the NEXT officers meet for two days to shape the future of the young generation. The Summer School has been held for the third year in Brussels and the NEXT Committee came up with several interesting new ideas and programmes aiming at education, research and clinical training.

Mobility

e-MOVE_

The e-MOVE project brings to life the futuristic idea of an electronic platform, providing information about different European countries for intensivists on the move. The platform was launched three years ago, and since then it has been constantly improved and updated to implement new locations and job-market opportunities. In the future, e-MOVE will serve as a dynamic tool to support long-term mobility.

THEMATIC FELLOWSHIPS_

The NEXT Fellowships have grown to become one of the most visible and popular activities of the NEXT Committee. After 9 Fellowships, more than 400 'NEXTers' from the Society have participated and used the opportunity to gain a unique work experience for one week in a centre of excellence of their choice.

All trainees and young specialist ESICM members from across Europe are invited to apply to participate in these 5-day programmes.

The reviewers of the applications underwent an Implicit Bias Test regarding gender and race (<https://implicit.harvard.edu/implicit/>).

The evaluation of the forms was completely anonymised and done in an aspect-oriented manner instead of a candidate-based approach. The scientific results and the selectivity of the new reviewing strategy will be shared in an abstract at LIVES 2019.

Research

RESEARCH PG-COURSE BY NEXT_

What started as a minor class for members interested in research has become a leading ESICM course. Outstanding scientists, clinical researchers, and journal editors shared their expertise during LIVES 2018 in Paris. The ESICM NEXT Research PG course covered topics from funding to scientific writing. The course has become increasingly popular, not only among junior members, but also among more experienced members of the Society. Therefore, NEXT and the Research

Committee are currently developing a new educational track for research that will be launched in 2020.

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 the next two years.

EUROPEAN JOURNAL REVIEW CLUB_

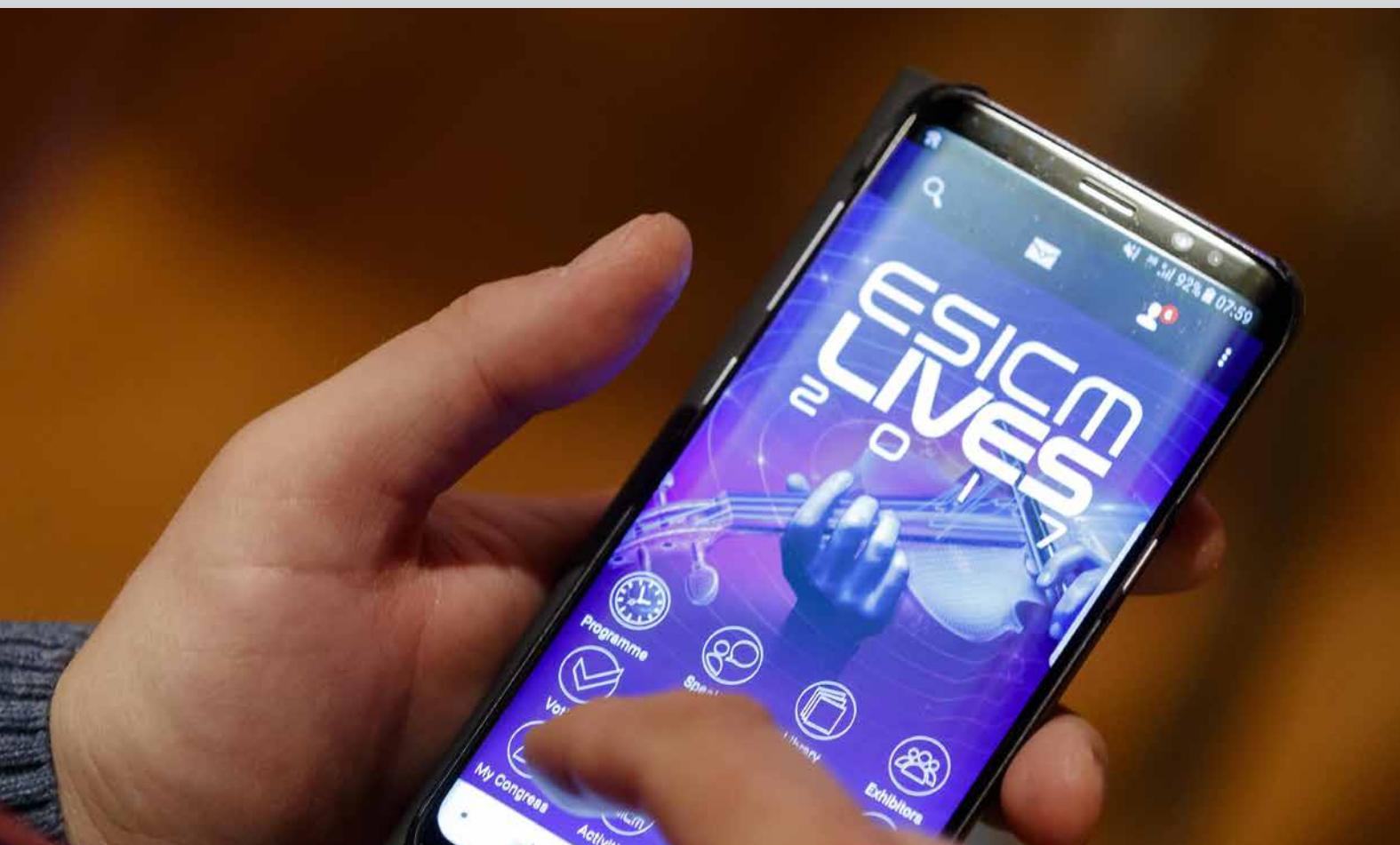
NEXT has been an active part of the Communication Committee since 2013, helping represent the Society in several media formats, including websites and social media. NEXT members started writing short reviews on articles published in major international journals.

The group of reviewers has grown exponentially during last 5 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 'NEXTers' contribute to the coordination of the Journal Club workload, guaranteeing a regular production of reviews and avoiding any overlap of topics and subjects.

Congress

PG COURSES_

After a great success of the ECMO PG-course at LIVES 2018, the NEXT Committee decided to continue with the strategy



to make the annual Fellowship-topic also the topic of the Congress PG course. In 2019, this will be hemodynamic management, together with the CD-section, and NEXT is very much looking forward to this fruitful collaboration within the Society.

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 also 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.

ICaBed4U

In 2018, NEXT started the brand-new service, 'ICaBed4U'. NEXT has created a Facebook group called 'ICaBed4U', where French NEXT members, French trainee members of SFAR (Société Française d'Anesthésie et de Réanimation) and SRLF (Société de Réanimation de Langue Française), living in Paris or nearby, can offer their accommodation to NEXT members from outside Paris for free during the congress.

The service aims at reducing financial barriers of young members travelling to the congress. ESICM incentivised the participation with free entrances to LIVES for the first 20 "matches". The programme will be evaluated after the second

round and will be reported in the Society's Diversity report.

NEXT-Mentoring

MENTORING V 2.0

All possible matches for the 2.0 Mentoring Programme were established and we are proud to announce a 30 % increase compared to the V 1.0. As in the 1.0 programme, NEXT aims at a thorough evaluation and is already looking for a continuation of the programme with a V 3.0 that aims at an increased structure to ensure success for all participants.

Björn Weiss
Chair, NEXT Committee



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ESICM N&AHP NURSES AND ALLIED HEALTHCARE PROFESSIONALS



It has been another busy reporting period for the Nursing & AHP Committee which continues to be very active in promoting the profile of Intensive Care nursing and AHP within the Society. This will be the last year of my mandate as ESICM N&AHP Chair. The Committee I have been honoured to lead continues to enjoy a proactive membership of nurses, physiotherapists and other AHPs, including clinical psychology and dietetics, many of whom participate across all 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 ESICM LIVES congress in Paris continued our year-on-year increase in active and increasingly collaborative participation across all aspects of the programme. The N&AHP Abstract Award Programme 2018 saw an increase, not only in the number of abstracts submitted and awarded, but also in submissions from AHPs, including clinical psychology and speech and language therapists.

Increased sessions of all types were delivered by N&AHP throughout the congress. This trend continues for ESICM LIVES in Berlin, with live debates, thematic sessions, research and networking, workshops on scientific writing, critical care rehabilitation, a topical symposium supported by Nestlé, plus clinical challenges.

N&AHP have been pleased to embrace the changing methodology of LIVES with increased numbers of multi-professional sessions, which is of course how we deliver

care to our patients.

The N&AHP app, 'AppIC', launched at LIVES Vienna, under the expert guidance of Anne-Sophie Debue and the AppIC team, continues to grow. We are seeing increasing numbers of users across the entire multi-professional team. ESICM LIVES in Paris 2018 saw APPIC become available in five languages, with additional clinical content. The future of AppIC will see more language options, the use of videos, and of course more evidence-based content. The intention in the future is for AppIC to become part of the Academy.

RESEARCH

The DecubICUs project - an epidemiologic point-prevalence study on pressure ulcers in ICUs, accepted as an ESICM Trials Group Study - has completed data collation with a publication planned shortly.

N&AHP INACTIC- International Nursing Advanced Competency based training for Intensive Care.

Working with a secured Erasmus Plus grant worth of over €142,000 continues to progress to develop an international set of competencies, with underpinning curriculum and resources, for advanced level intensive care nurses. This study is on target and will liaise closely with the COBAtrICE group.

We are pleased to report that the changes to membership fees and structure for N&AHPs has increased our membership numbers and consequentially engagement. Our current membership numbers are 290, an increase of 25% on last year.

As part of the Diversity Group we have seen significant alterations to the Standard Operating Procedures to ensure equality for our members.

N&AHP IN THE JOURNAL REVIEW CLUB (JRC)

N&AHP members are continuing to actively contribute to the JRC, led by N&AHP Committee member, Silvia Calvino-Gunther.

The web-based Infection course last year- supported by Bayer - 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 led to free entrance to LIVES 2018 for 22 successful delegates.

The course proved very popular with our group and building on this success and making changes based in feedback, we have this year successfully delivered a Critical Care Rehabilitation course, with the support of Melania Istrate's educational expertise using a blended learning methodology comprising:

- **Distance learning:**
 - Six webinars
 - Online support classroom on ESICM Academy
 - Forum communication
- **Face to face: workshop on practical application of principles, to be held during LIVES 2019 (Berlin, Germany)**
- **Evaluation system:**
 - Pre-testing
 - Continuous evaluation (short quizzes after each webinar)
 - Final evaluation in Berlin

We had a total of 615 registrants for this course, from a wide range of countries: 544 NAHP. 71 MD undertook the course, which is a reflection of the trend towards shared learning and that the topic was timely and appropriate for clinical practice across the team. 24 Winners in Continuous Evaluation/ Average grade: 77.46 (out of 100) will attend LIVES with support for travel and accommodation. This is a considerable benefit for N&AHP members. This format for educational delivery has proved popular and will form part of the educational strategy for N&AHP going forwards.

We have been increasing N&AHP involvement in Master Classes held at the ESICM offices, with secured faculty places for N&AHP experts for all courses and reduced fees for N&AHP wishing to attend. The development of shared

learning and education delivery by ESICM reflects how care is delivered in clinical practice as teams.

To be launched in Berlin, we have developed a Patient and Family webpage, to be hosted by ESICM. This is a new route for ESICM, in line with other Societies, in provision of Patient and family information and engagement. This draft page will be a foundation and a conduit for information for patients and families on the role of ESICM specifically in relation to research.

It will also explain the impacts and important results from projects in lay language and what it means to join clinical research as an ICU patient. Patient information will be provided via the ICU Steps webpage, as we work in partnership with this long-standing patient group, providing information in 17 different languages.

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. As I step down and hand over to Johannes Mellinghoff as the incoming Chair I would like to thank my Committee members for all their unfailing support and hard work, the EC and all at the ESICM Brussels office for their assistance, expertise and commitment, without whom we would not have been able to see N&AHP hold an increasing presence within the Society.

Carole Boulanger
Chair,
N&AHP Committee

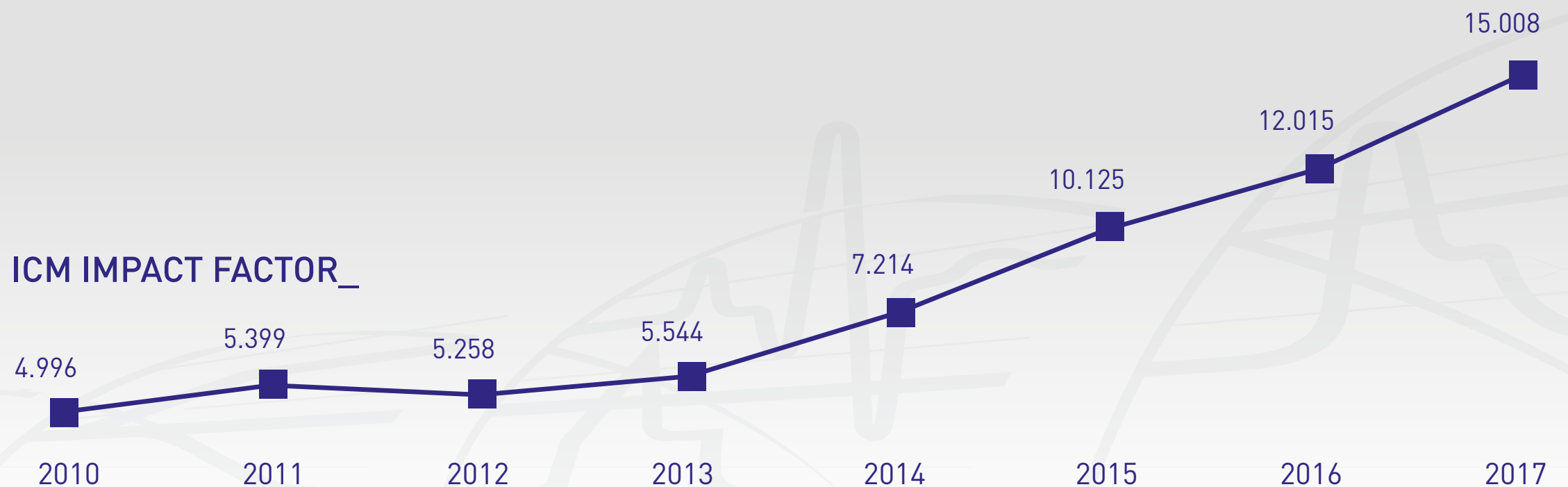


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ICM IMPACT FACTOR_



ICM ANNUAL REPORT

ICM's Impact Factor has reached 18.967! ICM now ranks 2nd among the medical journals in the Critical Care category and is the most highly ranked journal in this category entirely devoted to critical care. We can also confirm that we are the fastest publication media in the critical care track.

This year, ICM experienced a changeover of the Editor-in-Chief. Elie Azoulay left the journal after six successful years, during which the impact factor and all the other metrics were boosted. Giuseppe Citerio, from the University of Milano Bicocca, and previous Deputy Editor, become the new Editor-in-Chief.

Over the last six years, the journal has greatly improved its profile and metrics, and now it is second in the category of intensive care journals, and the number one dealing only with intensive care topics. The readership, if we only consider the growing number of downloads, has expanded it a lot. The article usage, accurately measured by Counting Online Usage of NeTworked Electronic Resources, will surpass 2 million article downloads this year. This is partially due to the possibility of accessing all the articles - even if not classically - through Open Access, with Springer Nature SharedIt, the content-sharing initiative.

The editorial line defined in the last few years by the Editorial Board will be refined, but the principles in place will remain. ICM is, and will remain, a critical care journal that publishes clinical studies covering all aspects of critical care. The journal publishes high-quality original papers that include critically ill patients with clear messages for all physicians who manage critical care patients.

The methodology and the content of original articles, review articles, systematic reviews, and meta-analyses will be evaluated closely for the application of high-level methodological standards. ICM will require authors to fulfill the appropriate Equator (Enhancing the QUALity and Transparency Of health Research) network checklist and to respect the requirements of the International Committee of Medical Journal Editors (ICMJE). ICM will also remain a forum for controversial issues, presenting different opinions from experts.

Moreover, we will also be an education resource for the newer generations, having some review articles, 'What's New', educational pieces and images. For images, we are expanding the section to include short pieces with a video attached. We are also starting to accept short research letters, a forum for communicating early results, proof of concepts, or interesting data taken from a small cohort. They are increasingly published and appreciated.

ICM will maintain its tradition of thematic issues and the Spring 2019 issue focused on organ donation and transplants.

We do not only focus on science and medicine. In the section 'From the Inside', ICM publishes poetry, personal stories, thoughts and memories, sounding boards, obituaries, or other qualitative materials that authors wish to share with colleagues.

Speed of the review and publication process will remain our hallmark for all articles, not only for fast track ones. Manuscripts providing new findings from large interventional studies can still be submitted as a 7-day profile publication, allowing important data to be rapidly made available in the public domain. The median interval from submission to first decision, including papers immediately rejected and manuscripts sent out for review, is 6 days, even if in the

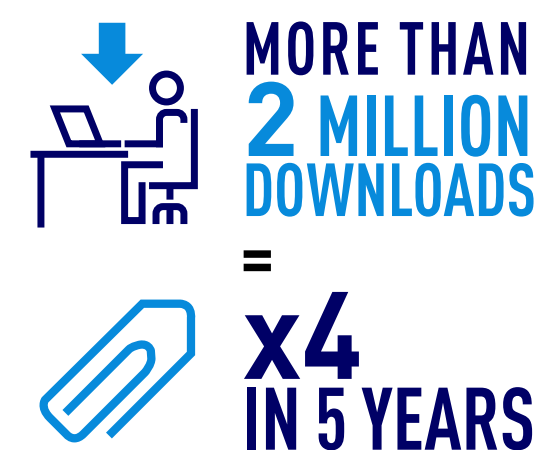
last few months the number of immediate rejections has decreased because we are facing an increase in the quality of the submitted papers, i.e. increased attractiveness of the journal.

More than 7,100 authors published at least one article in ICM over the last five years. This is really amazing and for this we thank our authors! The speedy review process relies on high-quality reviewers, with the more active ones included in a Board of Reviewers. Since 2017, ICM has rewarded its

reviewers with European CME Credits (ECMEC@s by the European Accreditation Council for Continuing Medical Education) for their participation in reviewing scientific and educational material.

Thanks to Springer, we are also very fast in the interval from acceptance to the online publication (15 days), with a final PDF immediately indexed in PubMed.

The changeover is not only for the Editor-in-Chief. Many of our esteemed editors are leaving the Board because their

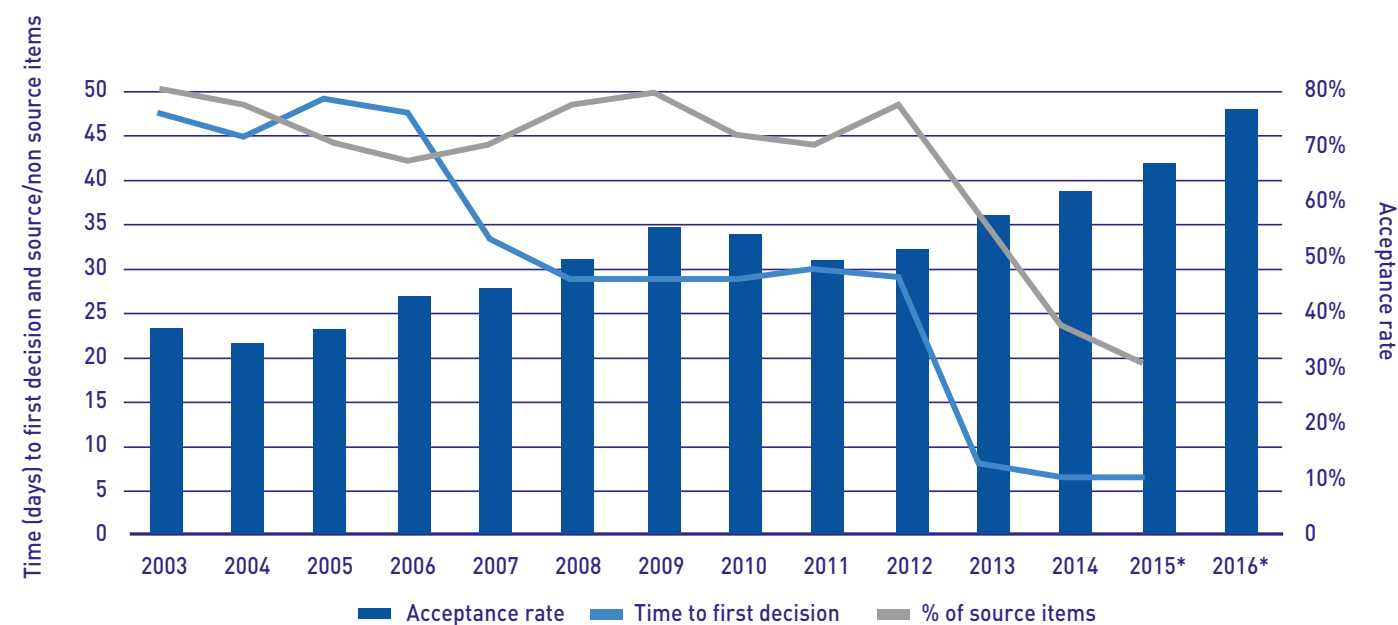


mandate has ended (Jean-François Timsit, Matteo Bassetti, Dominique Benoit, J. Randall Curtis, Gordon Doig, Margaret Herridge, Laurent Papazian, Mark Peters, Daniel Talmor, Antoine Vieillard-Baron). I would like to thank all of them for helping the journal to become what it is now, and I am sure that we will be able to count on their support again in the future. New Editors are joining the Board and the challenge in the next few months will be to develop again an “orchestra spirit”, with new musicians under the direction of a new orchestra director.

The incoming editors will increase diversity, covering different sub-specialities, geographic provenience, and heterogenous backgrounds. I am happy to have a talented team working with me. The three Deputy Editors will be Anders Perner, Miet Schetz and Samir Jaber. The Associated Editors’ team includes Alain Combes, Anders Aneman, Audrey De Jong, Claudio Sandroni, Garyphallia Poulakou, Geert Meyfroidt, Ignacio Martin-Loeches, Manu Shankar Hari, Michael Darmon, Morten Hylander Moller, Niall Ferguson, Otavio Ranzani, Sharon Einav, Thomas Bein, Yaseen Arabi and Sheila Myatra, as guest editor 2019. Eleven of the sixteen are new entries, selected from the reviewers that supported the journal the most in the last few years, and for their scientific profile.

Besides focusing on continuity, we are attempting further improvements. The most visible one will be the support of an illustrator to provide a more uniform style for most of our figures. I hope you will appreciate this. A team of junior editors will focus on the

new generations’ needs and on developing new social media strategies. ‘Visual abstracts’ will become available for most of the original articles and will be part of our communication. A brand new ICM portal, hosted by the ESICM website, was launched in 2019. A new series, ‘Less is more’ and a special issue on organ donation and transplant have been developed. Many other slight changes will appear in the next few months. So, follow us and keep an eye out for them.



The last point I would like to touch upon is the Impact Factor. Robert F. Kennedy said, “Only those who dare to fail greatly, can ever achieve greatly”. Our IF has constantly increased over the last six years. Nevertheless, the growth cannot be exponential forever. We will keep an eye on it, but this is not our main driver. The main driver is the readership and the service we are providing to the ICM community and ESICM members. This could be read as downloads from the website and with other metrics. Last, but not least, thanks to ESICM’s support, the journal, while remaining independent, is defining its editorial line.

Before concluding, I wish to thank Elie Azoulay. The current ICM is the result of thousands of hours of his work. When

Senior Deputy Editor, I had the privilege of having daily interaction with him for six years. I learned a lot from him - his huge commitment, his clear vision for the journal, the continuous striving for improvements, the unbiased approach to complex decisions, the attention to detail, the respect for authors and readership - the list could continue! Thank you, Elie. I know that the mission is almost impossible...but, just as you did, we want to try and succeed in the footsteps that you traced by your actions. Quoting Steve Jobs “Stay Hungry. Stay Foolish”, but also improve ICM.

Giuseppe CITERIO
Editor-in-Chief
ICM Journal



ICM EXPERIMENTAL (ICMX), THE PLATFORM FOR EUROPEAN RESEARCHERS PRESENTING BASIC, TRANSLATIONAL AND EXPERIMENTAL STUDIES

ICMx publishes articles from in vitro to in vivo and ex vivo investigations in both laboratory animals and patients, thus mirroring all facets of critical illness.

Over six years, until the end of 2018, the journal was under the editorship of Prof. Mervyn Singer. In January 2019, I took over this challenging task, and I have to thank Mervyn for his accomplishments as the journal’s pioneer. Submissions have been steadily growing over the last number of years, with more than 100 expected by the end of this year. A review article series on “Gaseous Mediators” has been launched - with the first manuscripts most recently being submitted - and ICMx has become the platform, not only for the ESICM LIVES abstracts, but also the INSPIRES symposia. We are currently targeting approximately 50 articles per year, but clearly, quality prevails over numbers and, hence, by September 2019, the rejection rate has doubled, reaching 54 %. Simultaneously, time to first decision has been halved. This was of course only possible due to the hard work of the members of the Senior-Editor Board, which covers the whole range of intensive care research. As a result, articles

published have been frequently cited, not only by journals within critical care, but from all fields of medicine.

The journal is still waiting for its first Impact Factor, which will hopefully be released early in 2020. In this context, the number of citations is crucial, which is two to three fold higher than that of the yearly publications. The number of citations again mirrors the high quality of the articles as well as the dedicated work of the Senior-Editor Board.

Peter Radermacher
Editor-in-Chief ICMx



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TREASURER'S REPORT_



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 BE0467.040.944 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_

Assets	K€	Equity and liabilities	K€
A. Fixed assets		A. Net equity of Association	
I. Tangible assets		I. Equity of Association	5.819
Land & Buildings	1.939	II. Balance sheet profit/Loss	
Tools, furniture and fixtures	71	Profit of the year	165
II. Financial assets			5.984
	2.010		
B. Current assets		B. Provisions	
I. Inventories		I. Provision for liabilities & charges	79
II. Accounts receivables			
Trade receivables	118	C. Liabilities	
Other receivables and assets	- 218	Credit Institution	-
III. Cash on hands and in banks		Trade payables	1.145
Short-term investments	6.326	Advances received on orders in progress	-
Cash at bank and in hand	549	Income Taxes	200
	6.775	Taxes, salaries and social security	
			5.984
C. Deferred charges and Accrued Income	- 70	D. Deferred charges and Accrued Income	1.307
Total assets	8.715	Total equity and liabilities	8.715

Explanation of the financial statement 2017_

GROUP OUTCOME

In 2017, ESICM generated a total revenue of € 6,708,462.90. Total expenses amounted to € 6,723,675.11 which results in a negative outcome of -€ 15,212.21 for the fiscal year 2017.

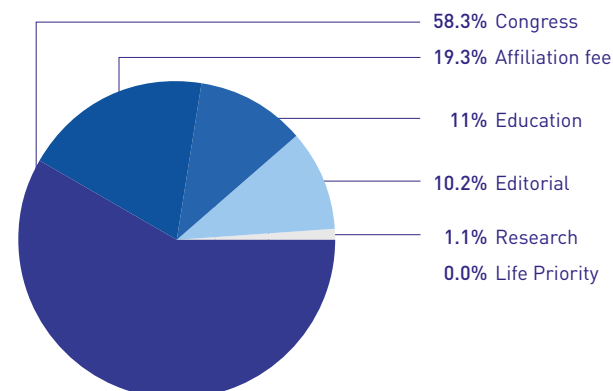
In general, the overall development of ESICM's equity is stable, and despite the challenging economic and regulatory environment, the Society is in a healthy position and is able to deliver all the objectives agreed in the ESICM Strategic Plan.

MAIN REVENUE 2017 (IN EURO)

Congress	€ 3.890,0000
Membership	€ 1.225,0000
Editorial	€ 636,0000
Education	€ 783,0000
Research	€ 50,0000

REVENUE

ESICM's main sources of revenue are composed of the congress registration fees and sponsorship. Other revenue streams include income from our courses, exams and other revenue, such as the ICM Journal.



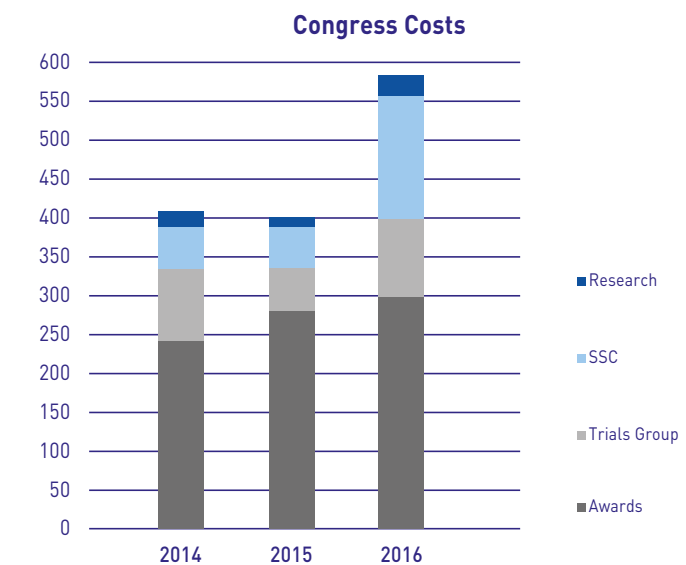
EXPENSES

Grants/awards/support/research

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 fulfils 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).

Services delivered by the contracted PCO (KIT) represent 2.93% of the total costs. This also includes the fees for sales and delivery of the exhibition & sponsoring management, fees for registration services and abstract fees.

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 programme, 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.

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KEY EVENTS 2019_

2020

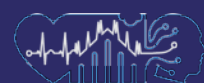
MASTER CLASSES BRUSSELS

EVENTS

JAN

Sepsis and Severe Infections

31 JAN-2 FEB



CRITICAL CARE
DATATHON

MILAN

FEB

Haemodynamic Monitoring

MAR

APR

European Perioperative Intensive
Care Curriculum (EPICC)



6-8 FEB

LIVES
PHYSIOLOGY

PRAGUE

MAY

Renal Replacement Therapy in ICU
State of the Art

JUN

Mechanical Ventilation



14-16 MAY

LIVES
FORUM

DUBLIN

JUL

AUG

SEP

OCT

NOV

The Art of Trauma Care

DEC

Point of Care Ultrasound (POCUS)



2020

LIVES
EUROASIA



10-14 OCT

LIVES
2020

MADRID

LIVES PHYSIOLOGY PRAGUE 6-8 FEBRUARY 2020



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**LIVES
FORUM
DUBLIN
14-16 MAY
2020**

SEPTIC SHOCK

FROM THE BUG TO ORGAN FAILURE

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**LIVES
2020
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For all inquiries, please contact:

ESICM CEO
Joël Alexandre
Tel: +32 (0)2 559 03 50
joel.alexandre@esicm.org

For research specific questions (collaboration on ESICM trials, surveys and clinical research programmes) please contact:

Guy François
Tel: +32 (0)2 559 03 53
guy.francois@esicm.org

For all enquiries about the EDIC & EDEC Diplomas and webinars, please contact:

Dominique De Boom
Tel: +32(0)2 559 03 74
dominique.deboom@esicm.org

For information about masterclasses, educational programmes and pathways, accreditation and nurses and allied health professionals, please contact:

Melania Istrate
Tel.32 (0) 2 559 03 58
melania.istrate@esicm.org



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