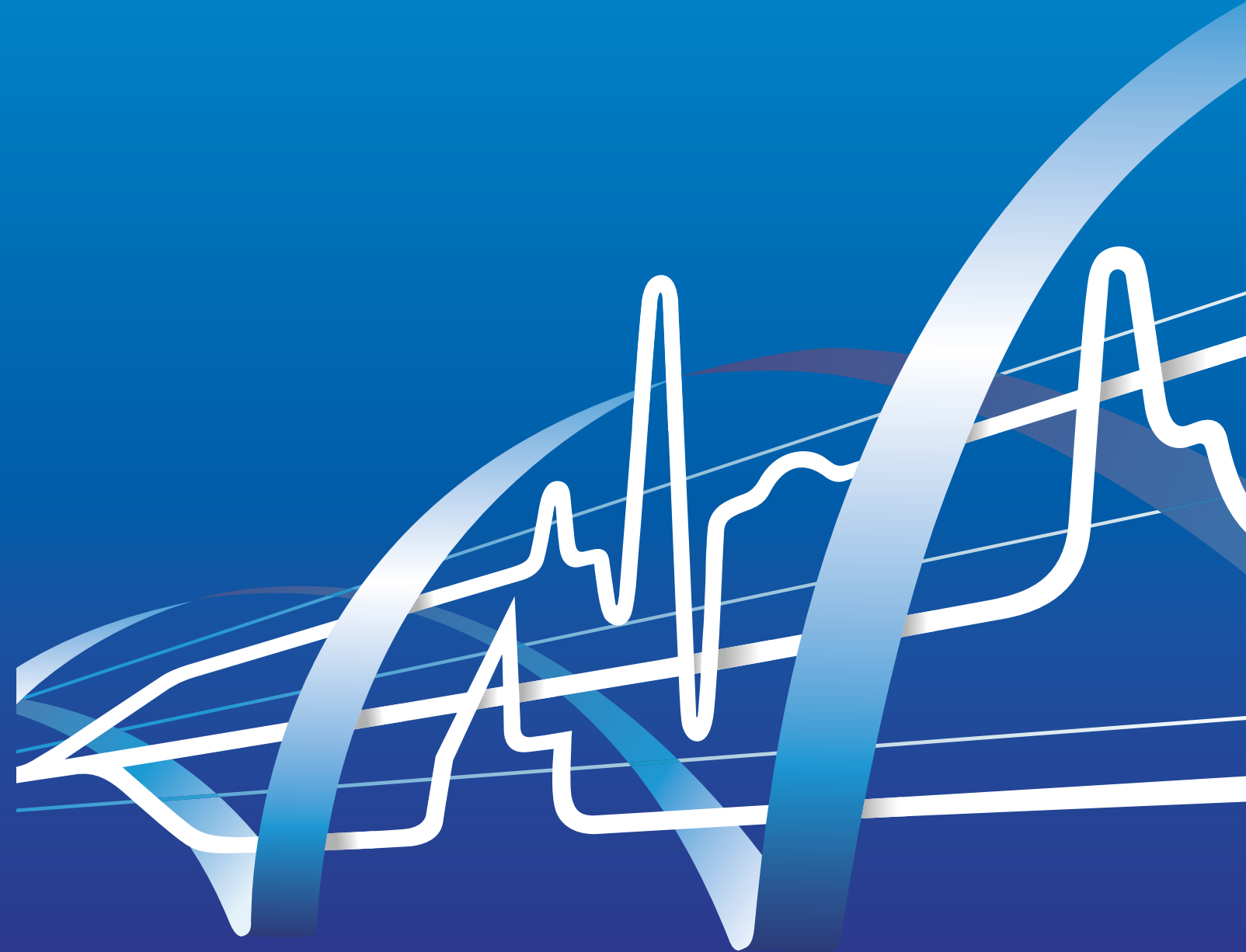




*The Intensive Connection*



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ESICM ANNUAL REPORT  
2020-2021

esicm.org

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The ESICM Annual Report describes ESICM activities from December 2020 to October 2021.

Only the Treasurer's Report refers to the fiscal year from 1<sup>st</sup> January 2020.

## DEAR COLLEAGUES

INTRODUCTION BY  
**THE PRESIDENT**



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

**Last year, LIVES Digital 2020 marked the end of an exceptional year.**

One where the world faced the most impactful health crisis of our lifetime. But also, one where ESICM stood as a guiding light and bedrock for healthcare professionals dealing with this unprecedented situation and advancing knowledge of this disease.

As the emergency protracted, in 2021 we experimented with new formats to be closer to our global intensive care community, expanding our presence and online reach. In addition to special online events such as the COVID-19 Marathon and the Datathon, we have offered free webinars on clinical practice, crisis management and burnout and invited world-renowned ICU experts to share their expertise with our audiences. Overall, these events have garnered more than 200,000 views and reached more than 1 million people worldwide. In addition, podcasts, articles and a daily presence on major social media allowed us to reach a broad audience straightaway.

The digitalisation of our activities has also touched upon our educational offer. The European Diploma in Intensive Care Medicine (EDIC) exam and our Master Classes have been fully delivered online to meet the needs of our healthcare community while ensuring interactivity and critical thinking for the best learning experience. We wish to thank all the healthcare professionals who have dedicated their time, energy, and passion to offering state-of-the-art education to our community. In the near future, we aim at developing more hybrid formats, mixing digital and on-site lessons.



**15**

MASTER CLASSES



**84**

ACE COURSES



**530**

HOURS OF STUDY



**305**

WORLDWIDE EXPERTS



**19 403**

PEOPLE TRAINED



**1 287**

EDIC CANDIDATES

A perfect example has been the C19\_SPACE programme, the European Commission-funded training scheme. This EUR 2.5 million project provided a homogenous COVID-19 Skills Preparation Course to all possible doctors and nurses not working regularly in ICUs across the EU that could be tailored and adapted to local realities. The programme started in August 2020 and concluded in May 2021. It included an online self-learning component followed by local training when allowed. Over 20,000 healthcare professionals registered. A total of 2,060 trainers were actively involved, and 17,494 trainees were enrolled on the programme. Currently, the transfer of intellectual property rights is being secured from the European Commission to ESICM so that the programme could also be used in non-EU countries.

**C19 SPACE**  
 COVID-19 Skills Preparation Course  
 Funded by the European Union



More Than  
**20 000**

HEALTHCARE PROFESSIONALS



**28**

COUNTRIES INVOLVED



**24**

STUDY HOURS



More Than  
**100**

VIDEOS PUBLISHED



**10 000**

VRE GOGGLES DELIVERED

At the European Union level, however, ESICM keeps advocating for the importance of improving the standards of care for patients by facilitating intensivists' free movement across EU countries. The recognition of Intensive Care Medicine as a profession able to move without restrictions in the EU would lay down the base of the future EU Health Union: it would provide European Intensivists ready to be mobilised and to apply their competencies across the EU, especially, but not only, in times of crisis where an immediate response is vital. The Society's plea has found the support of several members of the European Parliament, who have addressed a letter to the EU Commission's President, Ursula von der Leyen, urging the European Union to take the lead in guaranteeing our resilience in future health crises. The free movement of intensivists is something we owe to Citizens and Intensivists in Europe.

We also owe better care to our patients and their families, whom the pandemic has left outside the ICU, separated from their loved ones. We are strongly committed to opening more doors to them and welcome their ideas into our community. With this aim, we are starting a series of studies to detail and understand family-centred care around the globe and improve even further the way we care for our patients and families.

This crisis has also emphasized the Society's need for transformation in order to keep fulfilling its mission. We have thought through our role within the global intensive care community, our structure and our driving values. We have recently adopted changes in the SOPs, and we hope this new model will attract new talents and allow more diversity and efficiency for even more impact.

The last months have been hectic and fruitful. We here wish to take a moment to appreciate and thank all ESICM members and officers for their hard work and for devoting their precious time and energy during these still challenging periods. The Society would not exist without your dedication and collective effort. As vaccines are administered, we need to remain vigilant and keep learning and studying the pandemic, and this can only be done by collaborating and treasuring from each other's experiences. Finally, we would like to wholeheartedly thank the ESICM office staff for their exceptional and invaluable job since the beginning of the pandemic.

**MAURIZIO CECCONI**  
 PRESIDENT





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**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 Intensive Connection*

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

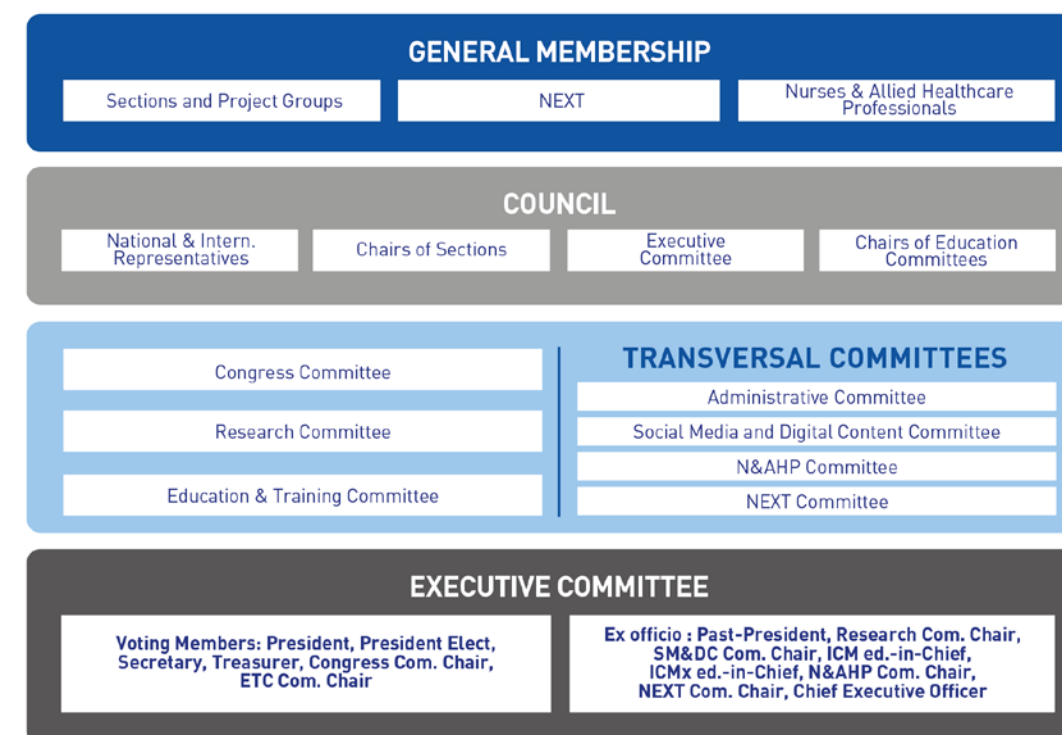
- To promote and coordinate **activities in the different fields of intensive care medicine**
- To foster **research and education** in these fields
- To provide recommendations for **optimising facilities for intensive care medicine in Europe**
- To organise and coordinate **international congresses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

## 2. ORGANISATION STRUCTURE

### ESICM ORGANISATION CHART



### 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.

## EXECUTIVE COMMITTEE



**MAURIZIO CECCONI**  
President  
Italy



**ELIE AZOULAY**  
President-Elect  
France



**LUI FORNI**  
Secretary  
United Kingdom



**JEAN-LOUIS TEBOUL**  
Treasurer  
France



**ARMAND GIRBES**  
Chair of the Congress  
Committee  
The Netherlands



**FRANTISEK DUSKA**  
Chair of the Education  
& Training Committee  
Czech Republic



**JAN DE WAELE**  
Chair of the Research  
Committee  
Belgium



**ADRIAN WONG**  
Chair of the Social Media &  
Digital Content Committee  
United Kingdom



**STEFAN SCHALLER**  
Chair of the NEXT  
Committee  
Germany



**JOHANNES  
MELLINGHOFF**  
Chair of the N&AHP  
Committee  
United Kingdom



**GIUSEPPE CITERIO**  
Editor-in-Chief  
of ICM Journal  
Italy



**NICOLE JUFFERMANS**  
Editor-in-Chief  
of ICMx Journal  
The Netherlands



**JOZEF KESECIOGLU**  
Past-President  
The Netherlands



**JOËL ALEXANDRE**  
Chief Executive Officer  
Belgium

## SENATE



**PETER SUTER**  
Switzerland  
1982-1986



**MAURICE LAMY**  
Belgium  
1986-1988



**LUCIANO GATTINONI**  
Italy  
1988-1990



**IAIN LEDINGHAM**  
United Kingdom  
1990-1992



**JEAN-LOUIS VINCENT**  
Belgium  
1992-1994



**LAMBERT G. THIJS** †  
Netherlands  
1994-1996



**JEAN CARLET**  
France  
1996-1998



**HILMAR BURCHARDI**  
Germany  
1998-2000



**JUKKA TAKALA**  
Switzerland  
2000-2002



**GRAHAM RAMSAY** †  
United Kingdom  
2002-2004



**JULIAN BION**  
United Kingdom  
2004-2006



**MARCO RANIERI**  
Italy  
2006-2008



**RUI MORENO**  
Portugal  
2008-2010



**ANDREW RHODES**  
United Kingdom  
2010-2012



**JEAN-DANIEL CHICHE**  
France  
2012-2014



**DANIEL DE BACKER**  
Belgium  
2014-2016



**MASSIMO ANTONELLI**  
Italy  
2016-2018



**JOZEF KESECIOGLU**  
The Netherlands  
2018-2020

## NATIONAL COUNCIL REPRESENTATIVES



**THOMAS HAMP**  
Austria



**PATRICK BISTON**  
Belgium



**JAN BENES**  
Czech Republic



**NICOLAI ROSENKRANTZ  
SEGELCKE HAASE**  
Denmark



**MATTI REINIKAINEN**  
Finland



**ANTOINE  
VIEILLARD-BARON**  
France



**ROLAND FRANCIS**  
Germany



**VASILEIOS BEKOS**  
Greece



**LORINIC ZAVORSKY**  
Hungary



**COLMAN O'LOUGHLIN**  
Ireland



**PETER VAN HEERDEN**  
Israel



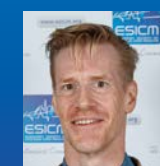
**KATIA DONADELLO**  
Italy



**JONE JACKEVICIUTE**  
Lithuania



**RIK GERRITSEN**  
Netherlands



**NICHOLAS BARLOW**  
Norway



**MARIUSZ PIECHOTA**  
Poland



**SOFIA ESCORCIO**  
Portugal



**IOANA GRINTESCU**  
Romania



**ALEKSEI SHCHEGOLEV**  
Russia



**DRAGANA LONCAR  
STOJILJKOVIC**  
Serbia



**ANJA KRAMARIC**  
Slovenia



**JOSÉ A LORENTE**  
Spain



**MICHELLE CHEW**  
Sweden



**MATTHIAS HILTY**  
Switzerland



**TUGHAN UTKU**  
Turkey



**JULIA WENDON**  
United Kingdom

## INTERNATIONAL COUNCIL REPRESENTATIVES



**ASSEM ABDEL-RAZEK**  
Africa



**TAPAS SAHOO**  
Asia-Pacific



**FLAVIO NACUL**  
Central & South  
America



**ASHRAF AL TAYAR**  
Middle East









**NATHAN NIELSEN**  
North America








## CONGRESS COMMITTEE

						
<b>ARMAND GIRBES</b> Chair of the Congress Committee The Netherlands	<b>MARLIES OSTERMANN</b> AKI United Kingdom	<b>JORGE MANCEBO</b> ARF United Kingdom	<b>XAVIER MONNET</b> CD France	<b>ARI ERCOLE</b> DS United Kingdom	<b>CHRISTIANE HARTOG</b> ETH Germany	<b>CHRISTIAN JUNG</b> HSRO Germany
						
<b>PEDRO POVOA</b> INF Portugal	<b>METTE BERGER</b> MEN Switzerland	<b>GEERT MEYFROIDT</b> NIC Belgium	<b>AARNE FELDHEISER</b> APM Germany	<b>RICARD FERRER ROCA</b> SIS Spain	<b>CLAUDIO SANDRONI</b> TEM Italy	<b>JOHN LAFFEY</b> TB Ireland
						
<b>MARGO VAN MOL</b> N&AHP Representative The Netherlands	<b>JAN DE WAELE</b> Chair of the Research Committee Belgium	<b>FRANTISEK DUSKA</b> Chair of the Education & Training Committee Czech Republic	<b>STEFAN SCHALLER</b> Chair of the NEXT Committee Germany	<b>VICTORIA BENNETT</b> NEXT Representative United Kingdom		

## EDUCATION AND TRAINING COMMITTEE

						
<b>FRANTISEK DUSKA</b> Chair of the Education & Training Committee Czech Republic	<b>ARMAND GIRBES</b> Chair of the Congress Committee The Netherlands	<b>LARS HEIN</b> Chair of the EDIC Exams Sub-Committee Denmark	<b>JACOBUS PRELLER</b> Chair of the e-Learning Sub-Committee United Kingdom	<b>LENNIE DERDE</b> Chair of the Clinical Training Sub-Committee The Netherlands	<b>IGNACIO MARTIN LOECHES</b> Chair of the COBA Faculty Ireland	<b>ADRIAN WONG</b> Chair of the Social Media & Digital Content United Kingdom
						
<b>CAROLE BOULANGER</b> N&AHP Representative United Kingdom	<b>SILVIA DE ROSA</b> NEXT Representative Italy					


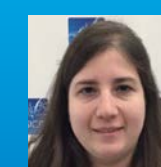














## N&AHP COMMITTEE

						
<b>JOHANNES MELLINGHOFF</b> N&AHP Chair United Kingdom	<b>NIKOLAOS EFSATHIOU</b> N&AHP Member United Kingdom	<b>MARGO VAN MOL</b> N&AHP Member The Netherlands	<b>CAROLE BOULANGER</b> N&AHP Member United Kingdom	<b>KATERINA ILIOPOULOU</b> N&AHP Member United Kingdom	<b>ANNE-SOPHIE DEBUE</b> N&AHP Member France	<b>MARTA BORKOWSKA</b> N&AHP Member Belgium

## RESEARCH COMMITTEE

						
<b>JAN DE WAELE</b> Chair of the Research Committee Belgium	<b>ANTOINE SCHNEIDER</b> AKI Switzerland	<b>BEN CREAGH-BROWN</b> APM United Kingdom	<b>BERND SAUGEL</b> CD Germany	<b>PAUL ELBERS</b> DS The Netherlands	<b>DIEDERIK VAN DIJK</b> ETH Netherlands	<b>ARZU TOPELI ISKIT</b> HSRO Turkey
						
<b>ANDREW CONWAY MORRIS</b> INF United Kingdom	<b>GUNNAR ELKE</b> MEN Germany	<b>CHIARA ROBBA</b> NIC Italy	<b>MARC LEONE</b> SIS France	<b>NICOLE JUFFERMANS</b> TB (adinterim) The Netherlands	<b>SOPHIE HAMADA</b> TEM France	<b>ARMAND GIRBES</b> Chair of the Congress Committee The Netherlands
						
<b>FRANTISEK DUSKA</b> Chair ETC Czech Republic	<b>NIKOLAOS EFSATHIOU</b> N&AHP Representative United Kingdom	<b>LAURA GALARZA</b> NEXT Deputy Chair Spain	<b>GEORGE KARLIS</b> Next Representative Greece	<b>MARIANGELA PELLEGRINI</b> NEXT Representative Sweden	<b>SHARON EINAV</b> Chair SRG Israel	<b>LISE PIQUILLOUD</b> ARF Switzerland

## NEXT COMMITTEE

						
<b>STEFAN SCHALLER</b> NEXT Chair Germany	<b>LAURA GALARZA</b> NEXT Deputy Chair Spain	<b>MARIA MARTINEZ MARTINEZ</b> NEXT Member Spain	<b>DAVID PEREZ TORRES</b> NEXT Member Spain	<b>ANDREA ORTIZ SUNER</b> NEXT Member Spain	<b>GEORGE KARLIS</b> NEXT Member Greece	<b>VICTORIA BENNETT</b> NEXT Member United Kingdom
						
<b>KRISTINA FUEST</b> NEXT Member Germany	<b>LAURA BORGSTEDT</b> NEXT Member Germany	<b>BEATRIZ LOBO VALBUENA</b> NEXT Member Spain	<b>MARIANGELA PELLEGRINI</b> NEXT Member Sweden	<b>MARIA VARGAS</b> NEXT Member Italy	<b>BURCIN HALACCLI</b> NEXT Member Turkey	<b>MASSIMILIANO GRECO</b> NEXT Member Italy
						
<b>SILVIA DE ROSA</b> NEXT Member Italy	<b>RAHUL COSTA-PINTO</b> International Representative Australia					

## ESICM OFFICE

ESICM's headquarter is located in Brussels, Belgium, in the European affairs district. The ESICM staff of 16 experts in various fields and of 8 different nationalities is led by our Chief Executive Officer, Joel Alexandre.

The year 2021, following on from 2020, saw the office operating in a work-from-home configuration. Governance, administration, education, science, events, publishing and advocacy all came online.

Over the past period, ESICM staff have consistently demonstrated dedication and resilience in maintaining operational excellence and diligent business management. Their ability to transform our business into a digital offering has ensured that ESICM has always thrived and continued to offer a wide range of events to its members. The success of these events has encouraged the Society to invest and expand the offering, particularly in the Education department. To this end, the staff has recently welcomed 4 new members.

**We can be proud of what we have achieved!**



**JOËL ALEXANDRE**  
Chief Executive Officer

### ADMINISTRATION



**DOMINIQUE DE BOOM**  
Executive Assistant



**ESTELLE PASQUIER**  
Project manager



**HORIA FTOUH**  
Accounting



**NICOLAS VANDER ELST**  
Membership



**STEPHANO RIDOLFI**  
Video Editing



**VERONICA SARNO**  
Junior Digital & Communication Officer

### LIVES EVENTS & RESEARCH



**CINDY MARTINEZ**  
Senior Congress Coordinator



**ELISE MAQUESTIAUX**  
Events & Sponsors Coordinator



**GUY MARIE FRANÇOIS**  
Research Team Leader



**VALERIE FARROW**  
Research Assistant

### EDUCATION & LEARNING DEVELOPMENT



**MELANIA ISTRATE**  
Head of Education & Learning Development



**PATRICIA PERALTA**  
Education Standards Specialist



**ELISA VERA**  
Event & Project Coordinator



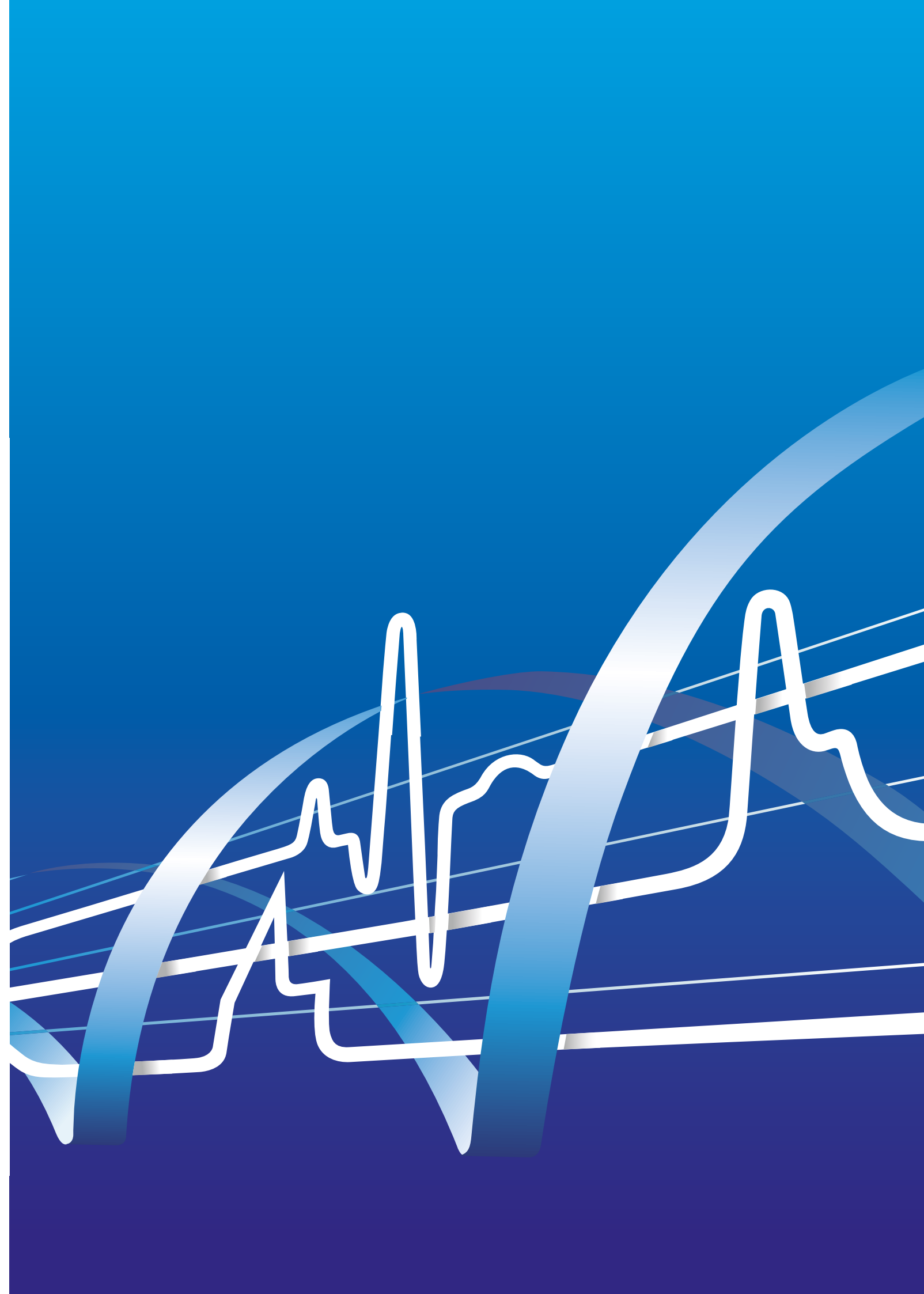
**MARGAUX OSSELAER**  
Education Coordinator



**ANITA BARTH**  
Education Coordinator



**KATALIN KENDI**  
Education Support





## SECRETARY REPORT



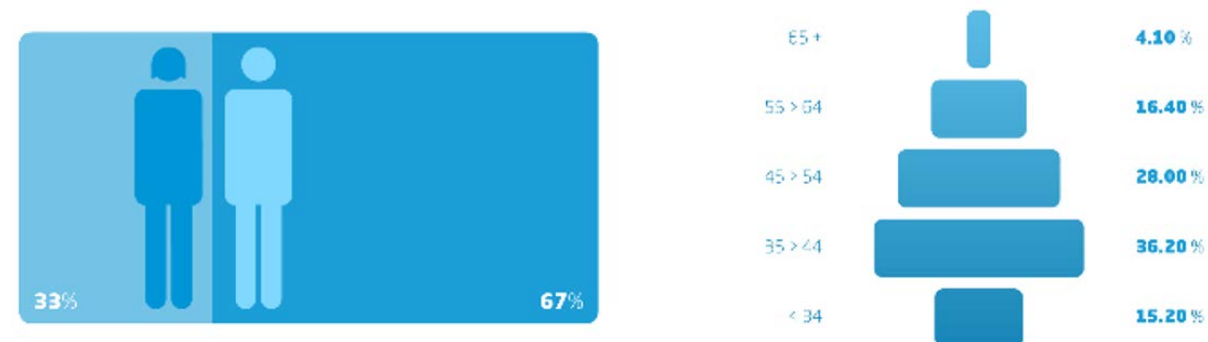
**LUI FORNI**  
ESICM SECRETARY

12 months on from our last report and the pandemic remains with us.

However, the response from our speciality has been above and beyond what could have been expected but unfortunately, we continue to be asked to give more. Our society has also risen to the challenge of maintaining, where possible, “business as usual” as far as we can in these unusual times with our commitment to research and education unabated. My colleagues will no doubt highlight their sterling efforts in this annual report for 2021.

But what of my last term as secretary? I am delighted to say that our society continues to thrive. As I write this report, we have some 9235 members (an increase from 8913 last year) of which over 72% are based in Europe with Asia being our next biggest contributor accounting for 10.8% of our membership.

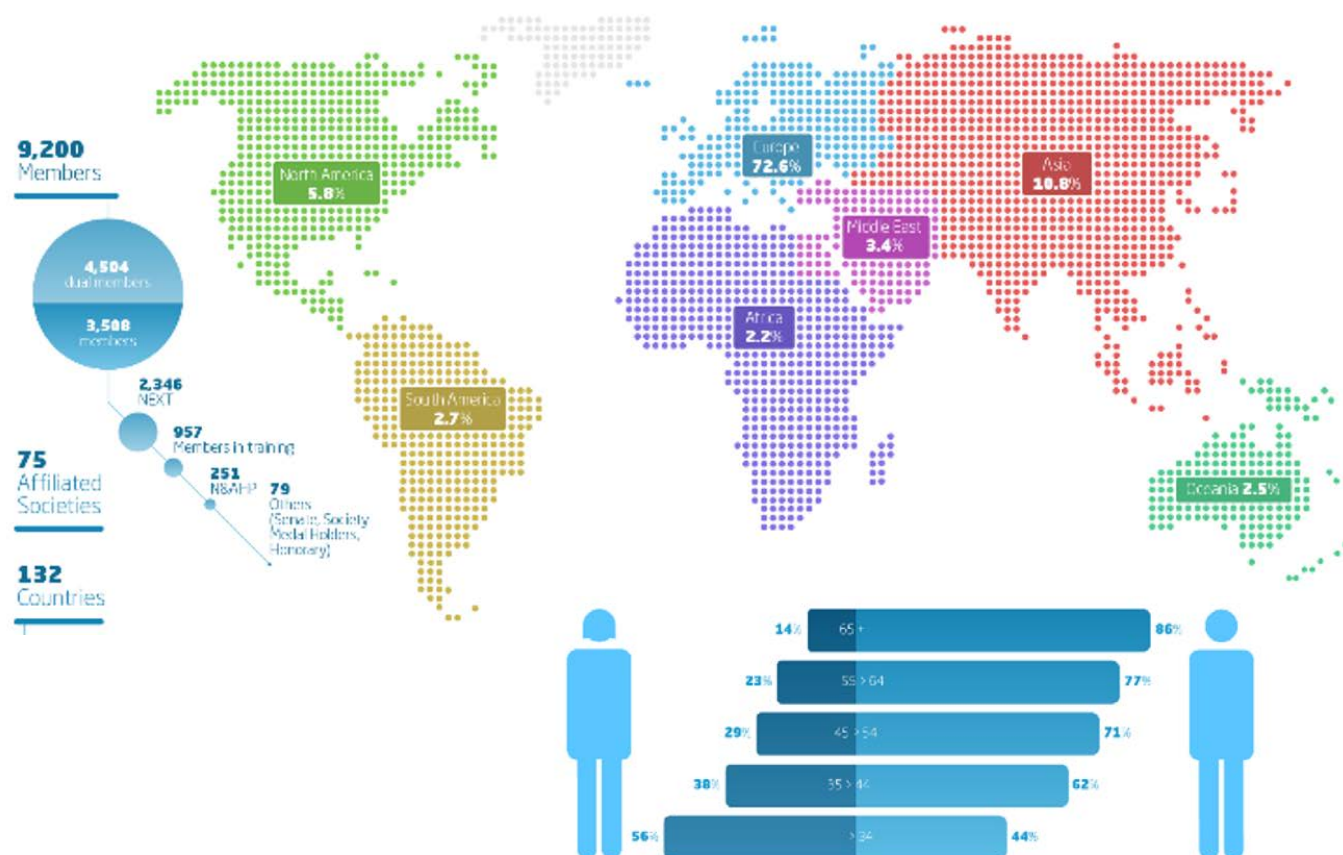
Over 58% of our members are primarily employed in intensive care medicine with approaching 30% having anaesthesiology as their primary interest. Last year I was particularly proud that 32% of our membership identified as women which have now increased further to 33% and 36.2% of our members are aged between 35 to 44 years. An interesting statistic for future reference is that in the under 34 years category which comprises 15.2% of our membership female gender accounts for 56% of that group. As secretary, I have been exercised by the need for transparency regarding equality and diversity within our number and I think these latest trends support this important issue. However, rather than resting on our laurels this year has seen significant changes throughout the structural organisation of the society which I hope will have a positive impact in the years ahead.



In brief, we have restructured part of the statutes, never a small task, to bring these up to date with our current practice and under the auspices of our lawyers which have been approved by the Council. However, the major changes which most of our members will be aware of are the changes to the Standard Operational Procedures (SOP's) and the structure of the sections. The previous concept of divisions has gone to be replaced by the administrative committee, congress committee and education and training committee. The Editorial & Publishing Committee is renamed the Social Content & Digital Media Committee and becomes transversal like the NEXT and N&AHP Committees with a new composition and duties encouraging more direct input from the sections. The education-related committees become sub-committees of the Educational & Training Committee (ETC) and the CoBaForum becomes the National Training Committee under the chairmanship of the ESICM President. The SRG is now more becoming the Methodology Group and new groups including the Global Intensive Care Group and EDEC Curriculum Sub-Committee join the fold. One of the biggest changes is within the Sections. Now only the Chairperson will be elected and will act as Chair Deputy (Chair-elect) the first year after election before automatically becoming the Section Chair for a single mandate of 2 years. The chairperson will nominate members to represent the sections at the various committees ensuring a wide representation reflecting our society. All such positions will be ratified by the EC to ensure our values of diversity and gender balance are upheld. You may ask why we have performed such an undertaking? The answer is simple. We felt that in order to remain an open and balanced society it is essential for members to engage at all levels which hopefully will then reflect in sustained change within the ESICM. One other thing to note is the addition of the Translational Biology Group a new section which I am particularly pleased to see and I know under the initial stewardship of Prof John Laffey will be a great success. I may even consider changing my allegiances!

Finally, there are a few additional changes. From now on all elected and nominated positions will be for two years except for the ICM & ICMx Editors-in-chief and no one who has already held an elected position in the Executive Committee can apply for any elected position outside of the Executive Committee. Furthermore, no one who has already held two positions in one of the elected positions of the Executive Committee can stand for further election within 6 years from the end of his/her last mandate, with the exception of the Presidency. This rings a personal tone in that I fall into this category. Having worked my way up from the AKI section to research chair and now secretary I hope I have added somewhat to the society and feel that I leave the EC in a more progressive place than when I joined due to the hard work and vision of those on the EC. I will miss my involvement, but it is time for fresh faces to step up and the recent call for elections has revealed a healthy number of applicants representing our society overall.

Given that I feel I have done my job and wish you all well for your personal futures as well as that of the ESICM.



### 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**



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### 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



```
public static double getNumber() {  
    Scanner sc = new Scanner(System.in);  
    System.out.println("Start:");
```

```
    public static double getNumber() {  
        Scanner sc = new Scanner(System.in);  
        System.out.println("Start:");  
        int 2y=AX;  
        while (X>3,14) {  
            System.out.print(i + "from");  
            i++;  
            System.out.println("Repla");  
            return getNer();  
            System.out.println("Repla");  
            return getNer();  
        }  
    }  
}
```



*The Intensive Connection*

**ESICM ACTIVITIES**



## 1. CONGRESS COMMITTEE

This past period has been a difficult but also inspirational period.

Much was asked of us as professionals in our day-to-day work as well as in the work we do for the ESICM community. In these difficult times, we have seen how important our network of colleagues really is, how much support and inspiration we receive from each other and how quickly we are able to increase our understanding of a new disease.

The exchange of knowledge and experiences within and outside the ESICM community was huge. For me, as the chair of DSA during this pandemic, it has been an immense challenge to find new ways and new opportunities together with the fantastic team and colleagues that we have within ESICM, at the office and outside the office. With the extra webinars that have been scheduled, and with all the changes in the way we transfer knowledge and experience it has been, however, an enormous pleasure to see well how everything has worked out.

In 2021, as in 2020, the pandemic has of course very much influenced the schedule for the congresses and symposia. The LIVES Forum on Septic Shock was postponed, as was the EURO ASIA conference. And for the second time, our annual LIVES Congress is to be staged as a fully virtual experience, and not as the face-to-face event that was originally planned to be held in Copenhagen. But, that said, this did not hold us back.

We have built on and further developed the digital tools and techniques that were developed for the successful LIVES 2020 Annual Conference. Our second digital edition of the LIVES Annual Conference will be held in October 2021. Again, the Congress Committee has prepared an outstanding programme of exceptional science and education, with opportunities for interactive debate and exchange.

We have tried, as far as possible, to offer interactive sessions on up-to-date subjects with well-known experts, but there will also be a large space given to young professions. The educational content has been carefully chosen to appeal to as many participants as possible, even offering basic courses in languages other than English. We have been very keen to offer diversity at every level, and to demonstrate the clear course that our Society has set. I hope all these new features will attract not only those who are familiar with our congresses but also new participants and new members to our Society.

I realize that one important feature of the congress is hardly present in this digital form: the pleasure of socialising and creating networks, of meeting and connecting with colleagues and friends in research and education. This is especially important for the younger members of our Society. Therefore, we have placed a high priority on providing chat rooms where you can invite and meet (new) colleagues from all over the world.

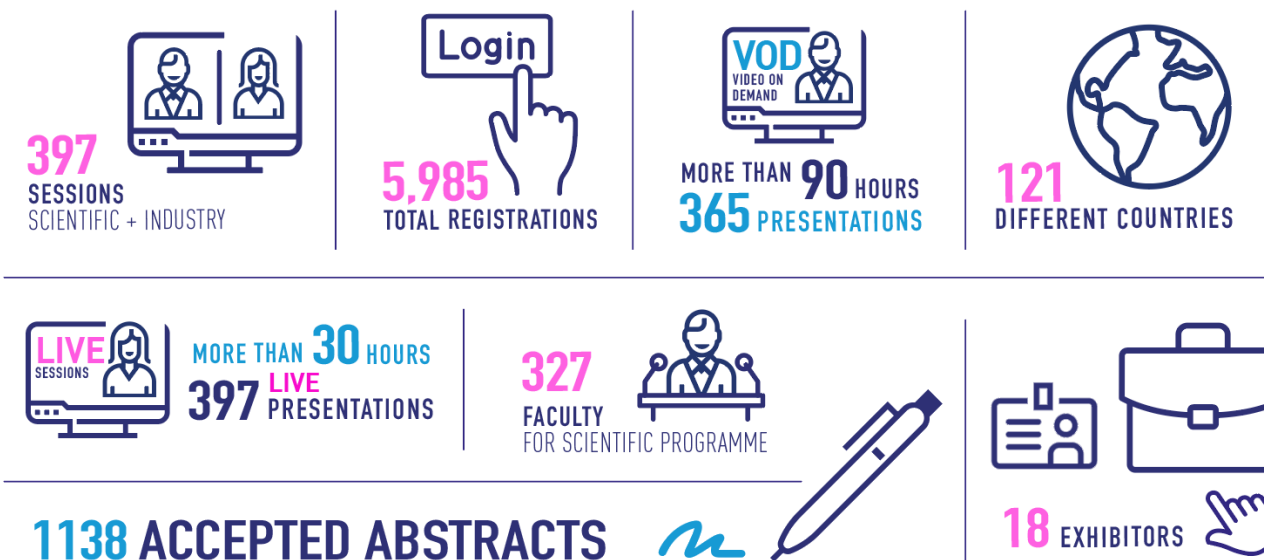
Finally, I am happy to announce that, this year, we have invited the major journals to participate in our highlight sessions where authors present their papers then follow up with a live discussion.

I am sure that the tools we have developed in this unprecedented period will remain useful in the post-pandemic period, will help us strengthen our connection with colleagues worldwide, and will ultimately benefit the people who are most important to us: our patients and their families.

**ARMAND GIRBES**  
 CHAIR, ESICM CONGRESS COMMITTEE



### LIVES 2020 ESICM ANNUAL CONGRESS IN FIGURES



### WHAT OUR DELEGATES LIKED BEST AT LIVES 2020

*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*



## 2. RESEARCH COMMITTEE



**JAN DE WAELE**  
**CHAIR,**  
**RESEARCH COMMITTEE**

More on  
[www.esicm.org/research/](http://www.esicm.org/research/)

After the 33rd ESICM Annual Congress “LIVES”, which went fully digital for the first time due to the COVID-19 pandemic, the last month of 2020 was quite rich with new project and survey endorsement proposals.

We successfully closed the UNITE-COVID study for patient recruitment and the work of the statistician and the data curator could finally start fully. The year 2021 started with a push to advance ESICM guidelines. More surveys applications came in steadily. The Synapse-ICU trial has had its primary paper published in June 2021.

### COMMITTEE AFFAIRS

The October 2020 elections have also seen four Section deputies replaced for the ARF, CD, MEN and POIC Sections. Due to COVID-19, these four new deputies will start their mandates officially at the General Assembly on Tuesday 8 December 2020. The 2021 elections will close on 13 September and we will have a new Chair and new sections representatives from the INF, NIC and NEXT Committee.

### BUSINESS UNITS

#### • Education

The education group has worked on the setting up of a research course proposal. The aim is to provide an educational resource for intensive care trainees, qualified intensivists and allied health professionals who want to learn how to conduct and appraise research in intensive care. The objectives are to provide an introduction to research and research methods for participants with little or no post-graduate research experience. Over time, the objectives are to develop a modular system that will allow both a progressive build from the basic introduction and modules which may be of specific interest to those with more research experience who want a refresher or need focused training on a specific topic. The modules will cover the range of skills and knowledge required to embark on a career as an intensive care researcher. The plan is for this to start end of the year/ beginning of 2022.

#### • 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. The aim is to communicate why involving patient representatives in large projects is necessary, and why patient-centred outcomes are increasingly used. The aim is to work on a webpage and take part in the society's initiatives linked to this topic.

#### • Surveys & projects

13 survey applications have been reviewed, which is a record number, and 10 have been endorsed. Several surveys originated from the Sections and independent groups. Several project endorsement requests were received and reviewed. Many epidemiological projects on COVID19 were turned down to prioritise the ESICM study Unite-COVID19. Details are below.

### RESEARCH AWARDS

As in the previous year, the 2021 campaign timeline has also been adapted to the Covid circumstances. 144 short applications were submitted out of which 52 were retained for the full application phase. The Jury meeting is set for 10 September 2021.

The Jury (Research Committee members with potential external invited members) meets in two sessions - pre-selection and jury meetings. Pre-selected submitted projects that have passed the scientific quality, methodology and budget reviews are sent to external assessors. Assessors are volunteers who expressed their interest in joining our pool of reviewers to help us to assess projects. They 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.

### PROJECT ENDORSEMENT

Since the end of 2020, 2 research projects were endorsed:

1. **CONCISE** (Core Outcome Measures for Clinical Effectiveness Trials of Nutritional and Metabolic Interventions in Critical Illness: An International Modified Delphi Consensus Study).
2. **SKIN-ICU**: SKin and soft tissue necrotizing INfections in the Intensive Care Unit.

### EU-FUNDED PROJECTS

The INACTIC project by the N&AHP Committee has successfully closed, with the final report and project results uploaded onto the Erasmus+ Project Results Platform (EPRP). Subsequently, a qualitative assessment and review of the project results has been undertaken. The final report and the translations of the Competencies in 9 languages are available on the ESICM website (under the Education tab). The final report has been approved by the EPRP.

The D2ICE-Digital Diagnostics for the Intensive Care Environment project application was submitted in May 2020 to the Horizon2020 Research and Innovation Actions plan H2020-SC1-2020-Single-Stage-RTD. ESICM was included among the 18 other partners and was to lead the Work Package 10 on communication, raising awareness and clustering events.

Despite a great deal of effort, the European Commission rejected the whole proposal on 23 October 2020. CICERO-Critical Illness Care for vERY Old Patients Project led by Bertrand Guidet (Paris, France): The proposal addresses the impact of ageing populations in healthcare management, with the increasing number of admissions to ICUs and prognoses on older patients after discharge. ESICM is included as Work Package leader in dissemination and communication. The project applied to the EU COST programme for funding (European Cooperation for Science and Technology). The proposal was rejected in June 2021.

### TRIALS UPDATE

1. **ESICM UNITE-COVID**. This is an observational, multi-centre, international point prevalence study that aims to discover more about the incidence of specific patterns, such as respiratory phenotypes, AKI, infectious complications, thromboembolic events (venous and arterial), neurological complications and cardiac complications in ICU COVID patients. The study closed for patient recruitment end of 2020. More than 4,500 pts have been validated in the eCRF. Analysis and data curation are done. Work on the primary paper is ongoing.

2. **ESICM UNITE-COVID – phase2**: In order to collect more data following the 2nd and in some countries 3rd wave of COVID infections, it has been decided to run a second phase. The CRF will remain the same. The plan is to collect data from January to June 2021.

3. **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 primary paper was published on 9 October 2020 in open access in ICM <https://link.springer.com/article/10.1007/s00134-020-06234-9>

4. **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. The recruitment is closed and the data cleaning and analysis are ongoing. The primary paper is expected to be published before the end of 2021.

5. **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 centres in the UK, Austria and Belgium and, as of June 2021, have included 620 patients.

6. **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 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. The primary paper is set to be published before the end of 2021.

7. **TRAIN:** TRansfusion strategies in Acute brain INjured patients: it 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 that have at least 50 patients with acute brain injury admitted per year. As of June 2021, 5088 patients have been screened. During the first months, more than 4387 patients were screened in the active centres; approximately 661 patients were randomised. The plan is to close the trial in 2022.

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, the incidence of organ failure and new outbreaks of infections compared to the application of more liberal strategies of oxygen administration. The eCRF platform is open and patient data entry has been ongoing since 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, to prioritize uncertainties in the clinical management of critical care patients with acute brain injury and support further collaborative hypotheses-based prospective studies. The primary paper is published in The Lancet Neurology, Vol20 Issue7 pp548-558 (June 2021). <https://www.sciencedirect.com/science/article/abs/pii/S1474442221001381?dgcid=author>

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. Almost 700 centres have registered. The eCRF platform closed for patient inclusion in 2020. More than 2,000 cases have already been validated. Data curation and statistical analysis are ongoing.

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 centres. The Cobalidation e-platform was set up in 2019 and basic simulation-based OSCEs have taken place. A new multicenter simulation-based OSCE has been performed. More on the publication is to be received in the Summer of 2021.

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 have closed. The eCRF is finalised and its opening is delayed due to COVID-19. The patient recruitment is set to open end of Summer 2021.

#### SYSTEMATIC REVIEW GROUP (SRG)

The plan is to resume the SRG activities and to set up a new group that will be called the Methodology Group. It will work on a larger endorsement/writing process that shall include guidelines, systematic reviews, consensus statements and manuscript endorsement.

#### ESICM GUIDELINES

At the end of 2020, the ESICM Executive Committee decided to initiate the development of guidelines. ESICM is fortunate to benefit from the expertise of renowned specialists and leaders in a substantial variety of topics in intensive care. Therefore, it was decided to make a selection and to begin with four guidelines on ultrasound, antimicrobial, fluids and acute respiratory distress syndrome. Work has started in all of them: panel members, conflict of interests, PICO questions, voting, discussions, literature search, ... Results are expected in 2022.



#### SURVIVING SEPSIS CAMPAIGN

The Surviving Sepsis Campaign (SSC) is a joint initiative between the ESICM and SCCM. The revision is ongoing. The latest recommendations were published in 2016 (ref: JAMA. 2016;315(8):801-810). Visit [www.sccm.org/sepsisredefined](http://www.sccm.org/sepsisredefined) for a complete list of resources and articles.

#### PUBLIC AFFAIRS

ESICM has joined forces with the European Hematology Association (EHA) and other medical societies and patient advocates across disciplines in a coalition calling for urgent action to make clinical trials less bureaucratic and more patient-centred, more efficient and cheaper. ESICM has co-signed the statement on reducing bureaucracy in clinical trials published on 25 September 2020 on the EHA website <https://ehaweb.org/assets/Coalition-statement-Reducing-bureaucracy-in-clinical-trials.pdf>.

ESICM is a full member of the Biomedical Alliance and part of their different tasks forces and committees (Medical devices, H2020, Education, Policy Officers group). More at <https://www.biomedeuropa.org/>

ESICM is also a member of the European Sepsis Alliance, whose 4th Annual Meeting was held online in March 2021. For more information go to <https://www.europeansepsisalliance.org/>



## REPORTS FROM THE SCIENTIFIC SECTIONS

# AKI



**MARLIES OSTERMANN**  
CHAIR



**ANTOINE SCHNEIDER**  
DEPUTY CHAIR

### ACUTE KIDNEY INJURY (AKI) SECTION

In 2021, education and research remained the key areas of the section's activity and collaboration.

#### EDUCATION

##### • ESICM e-Learning programme

The section has engaged with the ESICM Learning & Development team and is in the process of completing the e-learning module, in line with the EDIC curriculum.

##### • Journal Club/podcasts

The section is exploring new forms of educating and reviewing journal articles and research reports, including developing podcasts. The group led by E Hoste has engaged with experts in the field, including the founders of NephJC and is collaborating with Adrian Wong to explore the options. The aim is to raise more awareness about advances in critical care nephrology and the activities & contributions of the AKI section.

#### RESEARCH

##### • REVERSE AKI

This randomized controlled feasibility study investigating the role of liberal versus restrictive fluid management in AKI was developed during the AKI Section meeting in Spring 2017 and completed in 2020. The final manuscript was published in June 2021 (VAARAS ET AL. RESTRICTIVE FLUID MANAGEMENT VERSUS USUAL CARE IN ACUTE KIDNEY INJURY (REVERSE-AKI): A PILOT RANDOMIZED CONTROLLED FEASIBILITY TRIAL. INTENSIVE CARE MED 2021;47:665).

##### • Meta-analysis "Association between mean arterial pressure and acute kidney injury in critically ill adult patients"

This project previously won the ESICM SRG competition. The literature search has begun. The meta-analysis will be conducted in collaboration with Prof Sharon Einav and the team.

##### • CRRT practice survey

The group has developed a questionnaire exploring current CRRT practice in critical care. The survey has been endorsed by the ESICM and will be sent to all members. The AKI section has members from Asia who will also distribute the questionnaire through local networks. The results of the survey will serve to design future research studies.

##### • Impact of AKI duration on outcome in COVID-19

Led by section members from Uppsala University Hospital, Sweden, a multi-centre international study is planned to investigate the impact of AKI duration on outcomes in COVID-19.

#### LIVES 2021

The Chair and Deputy Chair of the AKI section contributed to the planning of the virtual LIVES 2021 congress, including the proposal of topics and abstract selection. Critical Care Nephrology features in several sessions.

#### ACTION PLAN FOR NEXT 6 MONTHS

##### • Virtual section meetings every 8-10 weeks

##### • Virtual RRT master class in autumn 2021

The 2nd virtual RRT master class is in preparation and will be held in autumn 2021. The programme has been adjusted in response to feedback to the RRT masterclass in 2020. New faculty, including nurses, have been invited to participate. The masterclass is already fully booked.

##### • ESICM webinar

An AKI webinar will be held on 21st October 2021 with a focus on Renal Replacement Therapy.

##### • Development of revised Journal Club / educational podcasts

Under the leadership of Prof E Hoste, the section is developing new strategies to highlight advances in Critical Care Nephrology and to celebrate the success of members of the AKI section.

We would like to take this opportunity to thank the ESICM Executive Team and colleagues in the ESICM Head Office for their ongoing support.

# ARF



**JORDI MANCEBO**  
CHAIR



**LISE PIQUILLOU**  
DEPUTY CHAIR

## ACUTE RESPIRATORY FAILURE (ARF) SECTION

The ARF Section members are actively engaged in research and educational activities proposed by the Society and by the Section itself. The year 2020 has been exceptionally challenging due to covid19 pandemics and, despite this, we have managed to keep up and running.

As a summary of 2020 activities, we have held two webinars: One on How to ventilate covid19 patients (April 2020), and the other on Optimizing ventilation and oxygenation to protect vital organs in COPD and hypercapnic patients (July 2020). In September 2020, we held our annual Masterclass on Mechanical Ventilation, which was hosted at the ESICM Brussels offices – and for the first time was fully virtual! Despite the organizational challenges, the course was fully booked and was an outstanding activity (81% of survey's respondents noted that the event was extremely useful for their professional activity). Because of the circumstances ESICM LIVES 2020 was fully virtual and the overall programme in general and the ARF section programme, in particular, were a great success. Of the 1100 abstracts received, the ARF section contributed nearly 20%. In addition, the Acute Respiratory Failure section has closely cooperated with the Neuro-Intensive care section to produce a consensus document on Mechanical Ventilation in Patients with Acute Brain Injury; this consensus has been endorsed by the European Society of Intensive Care Medicine Executive Committee and by the Board of Directors of the Neurocritical Care Society and the manuscript has been recently published in Intensive Care Medicine. There is one section project "Wean Safe", a worldwide survey on practices and outcomes of weaning from mechanical ventilation, which will be sent for publication soon.

As usual, the ARF Section is making substantial contributions to the drafting of the programme for the annual ESICM LIVES 2021 conference. This is possible only thanks to the active input provided by the Section's members. We are also looking forward to hearing from our new members about new research projects. We have already scheduled two new webinars for 2021: "Assisted breathing in ARDS patients" and "Making the diagnosis of acute hypoxemic respiratory failure in immune-compromised patients". Last but not least, the Masterclass on Mechanical Ventilation will be held virtually again in June 2021, and is already fully booked.

# CD



**XAVIER MONNET**  
CHAIR



**BERND SAUGEL**  
DEPUTY CHAIR

## CARDIOVASCULAR DYNAMICS (CD) SECTION

### RESEARCH

#### What has already been done?

- Survey on Use of Cardiovascular drugs in shock (UCARDS)
- Part 2 of the expert opinion paper on Current use of inotropes in circulatory shock has been published in Annals of Intensive Care (SCHEEREN, T.W.L., BAKKER, J., KAUFMANN, T. ET AL. CURRENT USE OF INOTROPES IN CIRCULATORY SHOCK. ANN. INTENSIVE CARE 2021;11, 21).

#### What is planned in the next months?

- Survey on the use of haemodynamic monitoring tools, to be discussed within the section and with the Executive Committee
- Consensus conference on "Haemodynamic monitoring": Since the last version, 7 years ago, many monitoring devices have appeared and indications are that the different devices, depending on the settings, might be clearer nowadays (for end 2021)
- A consensus conference of "Management of cardiogenic shock in adults", as recent recommendations are missing and many new issues regarding ECLS, interventional cardiology showed up (for 2022)

### EDUCATION

#### What has already been done?

- Masterclass "Haemodynamic monitoring" (7-9th April 2021) organised by X Monnet and Bernd Saugel
- An educational webinar on "Haemodynamic monitoring" was held on 15th April 2021 (Bernd SAUGEL, Thomas SCHEEREN, Xavier MONNET)

#### What is planned in the next months?

- Masterclass "Haemodynamic monitoring" 3-5th November 2021
- Proposal for some short practical lectures (10 minutes maximum), that would be available on the website, with self-assessment (5 MCQs at the end of each lecture) in a series of "How do I...?". Examples: "How do I interpret blood pressure?", "How do I interpret SvO2?", "How do I choose a vasopressor", "How do I assess the LV contractility with echo?" etc.
- LIVES 2021: The section has proposed 10 thematic sessions, including one joint session with the ARF section and a "general" joint session with multiple other sections.



# DS



**ARI ERCOLE**  
CHAIR



**PAUL ELBERS**  
DEPUTY CHAIR

## DATA SCIENCE (DS) SECTION

Intensive care admissions represent the most data-dense hospital episodes. With the rise in the use of electronic health records in both the ICU, operating theatre and in hospitals in general, routinely collected data is increasingly available and represents a vital resource to understand and improve patient care as well as understand the pathobiology of critical illness. But the sheer volume and nature of such data is inherently extremely complex both to extract, store and analyse. As a result, advances in data science, including machine learning and artificial intelligence are likely to play an increasing role in delivering ICU care.

The DS section aims to promote data science in intensive, perioperative and acute care. It has five key strategic goals: To provide education for clinicians interested in developing or appraising new technology; promoting research into clinical applications of data-driven healthcare, encouraging translation of novel computing and artificial intelligence techniques; to drive ICU data sharing across Europe in a legal, ethical and publicly-acceptable way; standard setting and benchmarking for electronic medical records (EMR) and other technologies to make sure technology is aligned to the needs of patients and clinicians and finally to Create a collaborative framework facilitating the collaboration of ICU professionals, data scientists and allied experts, as well as engaging industry partners for patient benefit.

### EDUCATIONAL ACTIVITIES

**2020/2021 Datathon:** ESICM Datathons bring together intensive care providers and data scientists in a collaborative (and competitive!) exercise to use real-world ICU big data to address clinically relevant questions. The 2020 Datathon was held over a weekend in Milan and was again a sell-out success. Because of the travel restrictions caused by the COVID-19 pandemic, the 2021 Datathon was entirely re-imagined in a virtual format. It was expanded to 16 inter-disciplinary teams (the biggest ever) who worked over a month-long period on one of three thematic tracks- steroids in shock, atrial fibrillation or lactate physiology. Not only did the teams apply state of the art data science techniques, but they also employed novel techniques to facilitate team-working and knowledge exchange remotely. This, in itself, generated nearly a third of a gigabyte of discussion alone with over 11,000 messages being shared as well as numerous virtual meetings!

The abstracts submitted for the final were of extremely high quality and a number of the teams have continued with their projects in the hope of producing peer-reviewed work. The winning teams will present at the 2021 LIVES meeting.

The Datathon was also remarkable in that it was the first in the world to leverage the newly published ESICM supported AmsterdamUMCdb dataset rather than MIMIC-III.

### INTERNATIONAL ACTIVITIES

The DS Section came together with counterparts from the Society of Critical Care Medicine (SCCM) and the executive leadership of both organisations at the Datathon to agree a joint data science initiative paralleling the Societies' Surviving Sepsis Campaign. A Joint Data Science Taskforce has been established and has been working to define transatlantic priorities for data science.

### RESEARCH ACTIVITY

The MIMIC and eICU open access ICU datasets have been instrumental in driving data driven research for many years now but did not previously have a European counterpart. DS has been instrumental in releasing the Amsterdam UMCdb open ICU research database: A dataset of over 23,000 anonymised patient episodes. This dataset is ground-breaking both in scope and also as an exemplar of how to such data-driven research can be conducted in the EU whilst simultaneously safeguarding privacy. The ethical process and algorithms have recently been published in Critical Care Medicine:

- Thoral, PJ, Peppink, JM, Driessen, RH, Sijbrands, EJG, Kompanje, EJO, Kaplan, L, Bailey, H, Kesecioglu, J, Cecconi, M, Churpek, M, Clermont, G, van der Schaar, M, Ercole, A, Girbes, ARJ, Elbers, PWG (2021). Sharing ICU Patient Data Responsibly Under the Society of Critical Care Medicine/European Society of Intensive Care Medicine Joint Data Science Collaboration: The Amsterdam University Medical Centers Database (AmsterdamUMCdb) Example. Crit Care Med, 49, 6:e563-e577.

Data curation is of critical, but under-appreciated importance in any large-scale observational study. The DS section has supported the ESICM UNITE-COVID study by providing a reproducible and documented data curation pipeline and making it available to UNITE researchers. It can be found on GitHub: <https://github.com/ariercole/UNITE-COVID> or under the DOI 10.5281/zenodo.4662578

# ETH



**CHRISTIANE HERTOG**  
CHAIR



**DIEDERIK VAN DIJK**  
DEPUTY CHAIR

## ETHICS (ETH) SECTION

The Ethics section promotes debate around ethical issues in the ICU and has a good presence during the yearly congress.

The Ethics section is also proud of the publications of trials produced by section members.

The Ethicus II study – End-of-life practices in intensive care units around the world, Sprung CL et al. Changes in End-of-Life Practices in European Intensive Care Units From 1999 to 2016. *Jama* 2019; 322: 1692-1704. Ethicus-2 was a 6-month prospective observational study under the auspices of the ethics section under the leadership of Charles Sprung (IL).

The DISPROPRICUS study group under the leadership of Dominique Benoit published further results in high-ranking journals (Jensen HI et al., Perceptions of Ethical Decision-Making Climate Among Clinicians Working in European and U.S. ICUs: Differences Between Nurses and Physicians. *Crit Care Med* 2019; 47: 1716-1723).

Two PIs are currently carrying out research projects with funding from the ethics section: Victoria Metaxa (ESICM grant for systematic reviews; Metaxa V. et al. Palliative care interventions in intensive care unit patients - a systematic review protocol. *Syst Rev* 2019; 8: 148) and Christiane Hartog (ESICM family partnership award for the MECAPICS project on animated cartoons to increase health literacy on PICS).

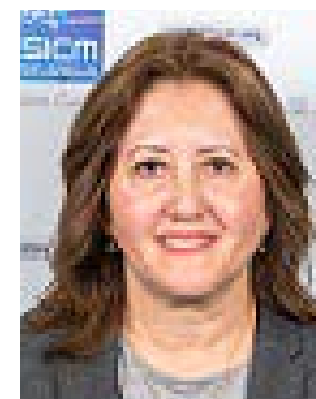
Despite the uncertain context, the second edition of the End-of-Life Care Master Class, under the direction of Andrej Michalsen, took place virtually. A total of 10 experts and 76 participants from 26 countries were very engaged in interactive activities and case-based discussions. The next virtual edition is already in preparation for 2022.

This year, more than ever, the pandemic has taught us to focus on what is most important and have patience. We are looking forward with trust and hope to the coming year and send our good wishes to all of you.

# HSRO



**CHRISTIAN JUNG**  
CHAIR



**ARZU TOPELI ISKIT**  
DEPUTY CHAIR

## HEALTH SERVICES RESEARCH & OUTCOME (HSRO) SECTION

### HSRO ASSOCIATED RESEARCH GROUPS

#### SANDMAN Study

Extensive preparations in 2020, hopefully, start in 2021

#### VIP2 Study

The VIP project is continuing. It has been a very productive study with several publications, sub-studies of VIP2 are ongoing. Overview on [www.vipstudy.org](http://www.vipstudy.org). VIP3 is planned for 2021.

European COST application by the project CICERO (Critical Illness Care for vERY Old patients) supported by ESICM, the European Geriatric Medicine Society, OECD, CA Stiftung has just been rejected for funding by EU despite excellent scores. Revision and re-submission planned in autumn 2021.

#### COVID Study

COVID-19 in elderly ICU patients, first data was presented during LIVES2020 in the Hot Topic Session. The main paper has been published in *Critical Care*. Several sub-studies are ongoing and/or planned.

#### TOXIC-Europe Study

Clinical epidemiological study about the 30-day outcome of intoxicated patients admitted to the ICUs from ED. Some countries have started and others are waiting for ethical approval. Centres can still register from the website.

#### SAPS-3D Study

The study has been postponed to 2021 due to the pandemic.

### WORKING/TASK FORCE GROUPS

#### Quality and Safety Working/Task Force Group

Different activities, however, stopped due to logistic reasons. Possible start of a study on patient safety in COVID-19 patients.

#### Health Economics Working/Task Force Group

currently no primary activity.

### OTHER ISSUES

- Participating in research and congress committee as well as plan to conduct a webinar under ESICM webinar series umbrella.

- Sessions planned during LIVES 2021





**PEDRO POVOIA**  
CHAIR

## INFECTION (INF) SECTION

**The Infection section has been actively developing activities in several fields in the ESCIM despite the pandemic, when we all have been deeply involved in caring for COVID19 patients in every country and every ICU.**

For the LIVES virtual 2020, the INF section organized 7 sessions and 7 joint sessions with other sections. The format of Clinical Based Fundamental (CBF)-septic shock (with SIS section and DPD) as well as the final Kahoot contest were very successful; the 3 sessions of the CBFs were the 3rd, 6th and 18th most attended sessions of the LIVES 2020! Overall, the congress had a high viewing rate ("Less 20 Sessions Attendees" – mean N=157 attendees and VOD – around 50 visualizations/day).

Our section is already preparing the next LIVES 2021, again in a virtual format. We are exploring new formats that stimulate interaction with remote attendees. We are organizing sessions in different languages (Portuguese, Spanish and French) to attain a wider number of potential attendees.

The INF section was deeply involved in the C19\_SPACE (COVID19 – Skills Preparation Course) training programme that aimed to provide some Intensive Care skills to health care professionals that do not work regularly in Intensive Care, doctors and nurses alike. This supported deployment during potential further surges of COVID19. It is important to stress that the impact of this EU financed training programme went far beyond the ICU areas, since the majority of the trained health professionals, doctors and nurses, worked in non-ICU COVID19 wards during the 3rd wave. Up to March 2021, the total number of trainees (doctors and nurses) is 16,586 and the number of trainers is 3056. This work of our society is a great achievement.

The commitment of our section to education is reflected in the Master Class on Sepsis and Severe Infections; the last Master Class in Brussels took place in January 2020. It was, once again, very successful with attendees coming from mainly European countries and it received accreditation from EACCME. This Master Class, with the priceless help of Melania Istrate and a technical team, was adapted to a virtual format. It took place in February 2021 and it was again a huge success; there were 78 trainees from 38 countries. There were trainees from Chile to Australia covering almost all time zones. And again, it received accreditation from the EACCME.



**ANDREW CONWAY**  
DEPUTY CHAIR

Because of the success of that edition and the existence of a large waiting list of potential trainees we are going to organize a second edition in September 2021 that will coincide with World Sepsis Day.

**THE INF SECTION HAS ALSO ENDORSED SEVERAL SURVEYS DURING THE LAST YEARS. SOME ARE COMPLETED WHILE OTHERS HAVE NOT YET FINISHED THE DATA ANALYSIS.**

**Current Practice of infectious disease management in the ICU – International survey (PRACT-INF-ICU)**  
led by Ashraf Roshdy (UK), 470 complete responses received, analysis is ongoing and will be complete soon.

**Respiratory virus-associated severe lower respiratory tract infections in critically ill adult patients: a survey of knowledge and practice patterns among European intensivists**

led by Guillaume Voiriot (France) Quentin Philippot (France). The findings from this survey were published in 2020, Ann Intensive Care 2020 Apr 28;10(1):50.

**International survey of the structure and organization of Intensive Care Units (Isorea)**

led by Armand Mekontso Dessap (France). Data has been collected and is under analysis.

**IPAFLU survey: Invasive Aspergillosis among Patients with Severe Influenza in Intensive Care Units**

led by Joost Wauters and Michelle Holtappels (Belgium) Frank Van de Veerdonk and Paul Verweij (Netherlands). The findings from this survey were published in 2020, Crit Care.2020 Mar 11;24(1):84.

**A-TEAM-ICU study group**

led by Hendrik Bracht and Christian Lanckohr (Germany) with collaborators Jeroen Schouten, D.W. de Lange, Menno Prins (Netherlands), Jan de Waele (Belgium). Data collection has been completed; analysis is close to completion to submit for publication in Q1 2021.

**Personal Protective Equipment and healthcare worker Safety in the COVID-19 Era (The PPE-SAFE survey)**

led by Alexis Tabah (Australia). Published in 2020 - Journal of Critical Care 59 (2020) 70–75.

**COVIDHGE: COVID Human Genetic Effort**

led by Jean-Laurent Casanova, and Laurent Abel (France). Ongoing recruitment.

**The EUROPEAN SOCIETY OF INTENSIVE CARE MEDICINE COVID-19 Project (UNITE-COVID)**

led by Jan de Waele (Belgium). Data collection complete, analysis ongoing for the 2020 edition. The 2021 edition has started to collect data on the day of the highest number of COVID-19 infections admitted in intensive care between January 1st, 2021 and June 1st, 2021.

**THE INF SECTION HAS SEVERAL ONGOING CLINICAL STUDIES, INCLUDING**

**Determinants of Antimicrobial use and de-escalation in critical care (DIANA)**

Led by Jan de Waele and Lisbet de Bus (Belgium). Published in 2020 - Intensive Care Med 2020;46(7):1404–1417;

**EUROPEAN study on Encephalitis in intensive Care (EURECA)**

Led by R Sonnevile and JF Timsit (France). Recruitment is over 500 with a target of over 650, recruitment stopped in France to prevent over-representation, a further year of recruitment in other participating nations;

**BLING3 A phase III randomised controlled trial of continuous beta-lactam infusion compared with intermittent beta-lactam dosing in critically ill patients**

Led by Jeff Lipman (Australia) and Jan de Waele (Belgium). Ongoing recruitment with over 3000 patients in Europe, planned to continue recruitment until 2022.

**Eurobact 2 Epidemiology and determinants of outcomes of Hospital Acquired Blood Stream Infections in the Intensive Care**

Led by JF Timsit (France) and Alexis Tabah (Australia). Over 2200 patients from 282 centres in 46 countries are included to date, the study is due to complete in early 2021.

**AURORA project: Annual Survey of Antimicrobial Resistance in intensive care**

Led by Jan de Waele (Ghent) Mateo Bassetti and Gennaro de Pascale (Italy). This study remains in the planning stages and is currently on hold.

Another important aspect of our Section's work is the guideline development:

#### Antibiotic de-escalation

(led by Alexis Tabah (Australia) and Jose Garnacho-Montero (Spain), with ESICM, ESCMID and ESGCIP endorsement) - published in 2020 Intensive Care Med. 2020 Feb;46(2):245-265;

#### Therapeutic Drug Monitoring

(led by Jason Roberts (Australia), endorsement of ESICM, ESCMID, IATDMCT, ISC). Published in 2020 Intensive Care Med. 2020 Jun;46(6):1127-1153.

And the section is also involved in the next guideline on **Antimicrobial Stewardship for Severe infections and Sepsis**.

Another important project is the development of an App of:

#### Antimicrobial Stewardship Practical guidance / ESICM AIRSPACE

where our section is also deeply involved.

For the Academy, some modules are under review (Pyrexia and infection control) and the module on Antibiotics has been finalized and is almost ready to be published.

As you can see, the INF section remains very busy and active. We are extremely grateful to all who have taken part in our activities, as leaders, participants and students. Whilst 2020 was one of the most challenging years any of us have ever experienced, the ESICM and its sections have played a major role in supporting the ICU community through it. We look forward to better times ahead.

# MEN



**Mette M. BERGER**  
CHAIR



**GUNNAR ELKE**  
DEPUTY CHAIR

## METABOLIC, ENDOCRINOLOGY AND NUTRITION (MEN) SECTION

**Metabolic, endocrine, and nutritional (MEN) care is an integral part of intensive care. Other ICU therapies benefit from optimised metabolic and nutritional therapy. Understanding the metabolic integration of different organs is required to conduct individualized therapy. The MEN section aims at improving this understanding and favouring collaborative research.**

**RESEARCH ACTIVITY: THE ACADEMIC ACTIVITY IS "INTENSIVE"**

### PUBLICATIONS BY THE SECTION

#### The VITATRACE

Micronutrient practice survey was published in Clin Nutr 2020. Coordinator M. Casaer. DOI:10.1016/j.clnu.2020.06.005

#### The Gastrointestinal dysfunction systematic review and Research agenda

was published in Critical Care 2020: the 25 members of the GI section were coordinated by A. Reintam-Blaser. DOI: 10.1186/s13054-020-02889-4.

#### Systematic review on hypophosphatemia

was endorsed by and received support from the ESICM-Research group (project ranked 2nd out of 16 submissions). Coordination by A. Reintam-Blaser. Published in Clin Nutr: DOI:10.1016/j.clnu.2020.09.04.

#### The point prevalence survey of hypophosphatemia

was conducted just before the pandemic. Altogether, 60 ICUs from 23 countries participated: 75.6% of patients revealed a hypoP in 15%. published in Clinical Nutrition. DOI: 10.1016/j.clnu.2020.12.017

#### The iSOFA study

is under revision in Clin.Nutr – lead: A. Reintam-Blaser

#### Enteral biomarker study

dynamics of markers such as citrulline, etc. Submitted – lead: A. Reintam-Blaser

### ONGOING STUDIES AND PROJECTS

#### VITDalize trial

is still recruiting (target 1200 for interim analysis, 2400 for full study). Coordination K. Amrein. Completion is projected at end of 2022.

#### Mesenteric ischemia

Co-endorsed by ESICM, a survey initiated by A. Reintam-Blaser within ESPEN and surgical societies – is recruiting

#### Phosphate studies

two are in preparation.

- Prospective prevalence study under the lead of C. Ichai and M Berger. Endorsement and Financial support from ESICM will be asked for.
- Bigdata retrospective project under the lead of P. Singer & M. Hiesmayr, to be followed by an RCT

#### CONCISE study

Core Outcome Measures for Nutritional and Metabolic Trials - lead Z. Puthucherry

### EDUCATION

#### Academy courses

the e-Modules dedicated to nutrition are up to date (Joel Starkopf)

#### Webinars

Medical nutrition therapy of the critically ill COVID-19 patient, presented by Arthur van Zanten, Elisabeth De Waele and Gunnar Elke and moderated by M Berger

### LIVES ANNUAL CONGRESS

#### LIVES 2020

The concept of the programme was completely revisited, going transversal and interdisciplinary in collaboration mainly with the AKI, NAHP, and ARF sections. The case-based fundamentals (CBF) initiated by F. Duska was an original and successful event.

#### LIVES 2021

The concept applied in 2020 has been reconducted, with multiple interactive sessions. MEN section has proposed 9 thematic sessions and will be present in the 2021 CBF dedicated to obesity.



# NIC



**GEERT MEYFROIDT**  
CHAIR



**CHIARA ROBBA**  
DEPUTY CHAIR

## NEURO-INTENSIVE CARE (NIC) SECTION

### RESEARCH

#### SURVEYS

##### • Ventilo survey

Mechanical ventilation in brain-injured patients. 657 responders Abstract at LIVES 2019 and manuscript published in ICM

##### • STRIKE Survey

Indications and intensive care management of patients with acute ischemic stroke. An increasing proportion of patients with severe stroke require admission to an intensive care unit (ICU) for neurological monitoring and management of post-stroke complications. Because of the rapid and irreversible nature of ischemic brain injury, the best goal-directed therapies must begin as early as possible. However, there is a lack of consensus regarding the recommended general management of the patients, starting from the locally agreed ICU admission criteria and therapeutic strategies. This survey has been developed to gain insight into the current clinical practice, ICU admission criteria, and management of acute ischemic stroke (AIS) patients. This survey aimed to gain insight into the current clinical practice, ICU admission criteria, and management of acute ischemic stroke (AIS) patients. Steering Committee: Chiara Robba, Giuseppe Citerio, Martin Smith. The results were presented by Chiara Robba at the Hot Topics Session at ESICM Lives 2020 (update 9 Dec. 2020). Manuscript published Journal of Neurosurgical Anesthesiology: February 09, 2021

##### • SEDATION Survey

Over-sedation in the ICU has profound consequences including delayed mobilization, prolonged mechanical ventilation, longer lengths of stay, and long-term cognitive impairment. However, the optimal approach to sedate neuro-critically ill patients, and more specifically TBI, is unknown. The potential for secondary cerebral injury has driven clinical protocols aiming to decrease brain oxygen consumption and intracranial pressure with high doses of sedatives. Given the long-term cognitive morbidity of TBI and the lack of randomized controlled trials, it is important to better understand sedation management in this population. The goal of this research study was to understand the current practices employed by clinicians when sedating patients with severe traumatic brain injury in the Intensive Care Unit. The survey was endorsed by ESICM (European Society of Intensive Care Medicine), ESICM NIC Section and NCS (Neurocritical Care Society) Coordinator: V. McCredie

### CONSENSUS

- Mechanical ventilation in patients with acute brain injury: recommendations of the European Society of Intensive Care Medicine consensus: Chiara Robba, Robert Stevens. Published Intensive Care Medicine 2020
- Consensus on the use of processed EEG for sedation monitoring: Frank Rasulo. ESICM endorsement was withdrawn but the manuscript is finalized and submitted to Critical Care Medicine
- Fever and temperature management in the Neuro-ICU: Raimund Helbok, Fabio Taccone. Planned.
- Sedation in neuro-critical care: proposal for consensus-guideline. Geert Meyfroidt, Chiara Robba. Not endorsed in 2020, new proposal planned.

### RESEARCH STUDIES

#### • ENIO

Extubation strategies in neuro-intensive care unit patients and associations with outcomes: the ENIO multicentre international observational study. (Raphaël Cinotti). Protocol published Anals transl Med. 2020 Apr;8(7):503. Inclusions ongoing

#### • TRAIN

TRAnsfusion Strategies in Acute Brain INjured Patients (Fabio Taccone). Inclusions ongoing

#### • BIKE

Brain Injury and Ketamine study (Geert Meyfroidt). Prospective RCT in 5 Belgian Centers to examine the safety and efficacy of Ketamine as an adjunct to standard sedatives in brain-injured patients. Protocol EC approved. Study drug agreement with Pfizer. First inclusions are expected in September 2021.

#### • SYNPOSE-ICU

Intracranial pressure monitoring in patients with acute brain injury in the intensive care unit: an international, prospective observational cohort study (Chiara Robba, Giuseppe Citerio). Manuscript published Lancet Neurol 2021; 20: 548–58

#### • SANDMAN

Sedation, Analgesia and Delirium MANagement – an international audit of medical, surgical, trauma, and neuro-intensive care patients (Lara Prisco, Geeta Mehta).

#### • EURECA

The EUROpean study on Encephalitis in intensive CARE units (Romain Sonnevile) is recruiting patients

#### • VENTIBRAIN

Multicentre Observational Study on Practice of Ventilation in Brain Injured Patients (Chiara Robba). Status: expected to recruit patient recruitment 2021

### EDUCATION

#### WEBINARS

- Neurological complications in Covid: Chiara Robba, Geert Meyfroidt
- ICU management of STROKE: Speaker: M Van Der Jagt; Chair: Martin Smith
- How to use cerebral ultrasound in the ICU? Speaker: Chiara Robba Chair: Fabio Taccone
- Automated pupillometry in critically ill patients. Speaker: Mauro ODDO Chair: Fabio Silvio Taccone
- CNS infections. Speaker: Romain SONNEVILLE Chair: Raimund HELBOK

#### ELEARNING PLATFORM AND EDUCATION

- TBI Module delivered 2019
- Neuro-monitoring (coordinated by Dr Carmen Lopez Soto and Dr Valentina Della Torre)
- Brain US and TCCD (coordinated by Dr Camilo Rodriguez, with videos and webcasts support by Dr F Chacon-Lozan)
- New Modules:
  - o Neuroanatomy and Neurophysiology
  - o Neurological Examination in neuro ICU
  - o Water and Electrolyte management in the Neurocritically Ill patient
  - o Subarachnoid Haemorrhage
  - o Intracerebral Haemorrhage
  - o Spinal Cord Injury (w TEM)
  - o Neuroanaesthesia
  - o Anoxic-Ischaemic Encephalopathy (w TEM)
  - o Neurorehabilitation (w NAHP?)
  - o Central nervous system infections
  - o Neuro-oncology
  - o Seizures and Status epilepticus
  - o Brain Death and Organ Donation (w POIC?)
  - o Septic Encephalopathy (w INF/SIS?)
  - o Medical disorders in neuro ICU
  - o Prehospital Management of the brain-injured patient (w TEM?)

#### LIVES: CASE-BASED FUNDAMENTALS

- 2020: TBI
- 2021: aSAH

#### ESICM MASTER CLASSES

##### • THE ART OF TRAUMA CARE

Severe traumatic brain injury chapter

##### • HAEMODYNAMIC MONITORING

Cerebrovascular autoregulation chapter

# APM

FORMER POIC



**AARNE FELDHEISER**  
CHAIR



**BEN CREAGH-BROWN**  
DEPUTY CHAIR

## ANAESTHESIA & PERI-OPERATIVE MEDICINE (FORMER POIC) SECTION

### SECTION MEETINGS

During the online ESICM Lives Meeting in October 2021, a web meeting of the section is planned. To further discuss and plan future projects thereafter we plan to hold virtual web meetings two or three times a year to intensify the contact

### RESEARCH

The APM section has endorsed the following ongoing survey and project:

- SQUEEZE, a prospective multi-centre international observational study of postoperative vasopressor usage. Led by Ib Jammer and Ben Creagh-Brown
- Candida prophylaxis and treatment in intensive care patients after abdominal surgery in Europe, led by Sharon Einav

### EDUCATION

The APM section has provided the following educational content:

- Webinars: Improving patient safety, now more than important than neve, presented by Martin Bromley, Rhona Flin and François Jaulin and moderated by Yen-Len Nguyen
- Masterclass: Perioperative Intensive Care (digital) December 9-10, 2021
- EPICC lead for perioperative changed to Victoria Bennett (from Bernado Pinto Bollen) – NEXT committee members. New modules have to be developed.
- Case-based fundamentals at LIVES 2021: High-risk surgical patient, in addition to several thematic proposed sessions

# SIS



**RICARD FERRER-ROCA**  
CHAIR



**MARC LEONE**  
DEPUTY CHAIR

## SYSTEMIC INFLAMMATION AND SEPSIS (SIS) SECTION

The Section played a significant part in the composition of the scientific programme of ESICM e-Lives 2020. Very well attended both VOD and Live sessions. We hope to reiterate the same success with the LIVES 2021 programme.

The activities of the SIS section on the ESICM Academy were coordinated by Nathan Nielsen.

- The SIS section continues to be a strong contributor to the activities of the ESICM Academy. One of the newest ACE Courses of the Academy «Disseminated Intravascular Coagulation» was authored by SIS members Nicole Juffermans and Marcia Muller, and this course is already in the Top 5 most viewed courses in the entire Academy despite only being released this year!

- In the effort to ensure that all Academy material is «state of the art» and properly updated, we would like each significant course to be updated every two years. Of the core SIS-authored courses, the ACE course most in need of updating is the Sepsis and Septic Shock ACE Course.

The webinar entitled Covid19: block or boost the immune response, was presented by Lennie Derde and Mervyn Singer.

The Master Class on Sepsis and Severe Infections was successfully provided online 25-26 February 2021 and feedback from the delegates was very positive (Mean score extremely useful/Excellent). 72 participants. Due to the great success, a second Masterclass is scheduled for 13-14 September 2021, on the occasion of World Sepsis Day, which the section supported and endorsed. Following the Sepsis Resolution, the WHO is highly interested in collaborating with ESICM on issues related to sepsis prevention and quality improvement initiatives.

The Chair of the Section contributed to the activities of the Surviving Sepsis Campaign Guidelines Steering Committee: Adult SSC guidelines are finished.

The members of the section are actively contributing to the ALIVE Initiative (sepsis education in resource-limited settings), as well as collaborating with some NEXT committee activities.



# TB



**JOHN LAFFEY**  
CHAIR



**NICOLE JUFFERMANS**  
INTERIM DEPUTY CHAIR

## TRANSLATIONAL BIOLOGY (TB) SECTION

### 2020 ANNUAL REPORT

**A proposal to create a Translational Biology Section was formally approved in December 2020 by the ESICM Council. This section developed from a working group within the ARF Section, following the strong support of the leadership of multiple sections across ESICM.**

The overarching objectives of the TB section are to enhance the profile of basic/translational research within ESICM and to provide opportunities for collaboration, education and training to Principal Investigators and trainees within ESICM.

#### Specific TB section initiatives include:

- Creation and Maintenance of a Registry of current capabilities for basic/translational research across ESICM.
- Identification of significant gaps that exist in the translational pathway (e.g., large animal facilities) infrastructure
- Identification of collaborative opportunities for section members
- Promotion of mentorship for translational science-oriented young professionals among section members
- Providing platforms for the presentation of basic/translational research within ESICM
- Exploring opportunities for funding for consortia in translational ICU research

### 2021 ACTIVITIES PLAN

#### Raising awareness of TB Section within ESICM Membership

- The webpage is now in place at <https://www.esicm.org/groups/translational-biology/>
- Blast emails to alert ESICM members to the presence of our new Section
- The process to recruit new Section members progressing well.

#### TB Section ESICM Webinar 'How to conduct Research'

- Dr Mariangela Pellegrini: 'The challenges for an early career investigator in setting up a laboratory research programme'.
- Dr Harm-Jan de Grooth: 'Pitfalls and opportunities for ICU-related observational research'

#### ICM Experimental – Collaboration with the journal to commission following Reviews

- Models of ARDS phenotypes
- Preclinical models for Vaccine development
- The immunology (or biology) of COVID-19: possible implications for therapy
- Stem cells for severe viral pneumonia
- Towards a biologic definition of sepsis
- Towards a biological definition of ARDS

#### Conferences and Meetings

- LIVES 2021 – The TB Section has proposed 9 sessions for the programme for LIVES 2021. Strong focus on inter-sectional collaborative proposals.



# TEM



**CLAUDIO SANDRONI**  
CHAIR



**SOPHIE HAMADA**  
DEPUTY CHAIR

## TRAUMA & EMERGENCY MEDICINE (TEM) SECTION

### ESICM LIVES

For LIVES 2020, TEM organised eight thematic sessions which were well attended. We valued interdisciplinarity, diversity, and inclusion of new talents.

- **Controversies in targeted temperature management after cardiac arrest** in collaboration with the Neuro Intensive Care Section
- **Controversies in haemorrhagic shock**
- **After cardiac arrest** joint with the European Resuscitation Council
- **Long-term outcome of ICU patients** in collaboration with the Acute Kidney Injury, Neuro-Intensive Care, and Acute Respiratory Failure sections
- **Neurosurgical controversies in neurocritical care** in collaboration with the Neuro-intensive care section
- **Update on Advanced Life Support** in collaboration with the Cardiovascular Dynamics and Acute Respiratory Failure Sections
- **Myth buster – facing the myths** in collaboration with the Respiratory Failure, Infection, Health Services Research & Outcome, and Cardiovascular Dynamic Sections.

In addition, TEM organised a 45-minute Interview with Jerry Nolan about Cardiac Arrest. This was the third most attended interview of the annual congress. One-third of the invited TEM faculty included new speakers and female speakers.

### EDUCATION

Concerning the **ESICM ACE** (Academy Critical Care Education) Courses, the three online modules recently developed and updated by TEM, “Burns injury”, “Major Intoxication”, and “Multiple trauma” have been very successful. They rank among the most popular modules, having enrolled 1073, 1094, and 1001 participants so far, respectively. We congratulate TEM Deputy Sophie Hamada and the numerous contributors for their great job.

The TEM Section has held an e-Masterclass on Trauma, entitled “The Art of Trauma Care” on March 18, 2021. The Masterclass was fully booked and very successful. The TEM Section is preparing the next edition of the annual Masterclass on Trauma. The Masterclass will be held online, as an e-event, or face-to-face, according to the status of the COVID-19 pandemic.

### RESEARCH

In 2020, several studies by TEM Section members have been published. Among them, a post-hoc analysis of the COMACARE trial from Markus Skrifvars (Helsinki, Finland) investigated neurofilament light chain (NfL), one of the most promising markers of hypoxic-ischaemic brain injury, in a cohort of 112 patients resuscitated from out-of-hospital cardiac arrest. The study showed

that high blood levels of NfL predicted unfavourable outcomes with an area under the receiver operating characteristic curve (AUROC) of 0.98 at 24h, 48h, and 72 h from the arrest, and high precision. The study has been published in the January 2020 issue of *Intensive Care Medicine*.

Jerry Nolan (Bath, UK) led a secondary analysis of the PARAMEDIC2 randomised controlled trial comparing adrenaline with placebo after cardiac arrest. The analysis compared the effectiveness of the intravenous and intraosseous routes for adrenaline administration and included 7317 patients, among whom 2237 received the study drug via the intraosseous route. The study demonstrated that both the intraosseous and the intravenous routes of adrenaline administration are equally efficient in increasing 30-day survival or favourable neurological outcome at discharge vs. placebo. The study was published in the May 2020 issue of *Intensive Care Medicine*.

Aurora Magliocca (Milan, Italy), TEM and NEXT member, and recipient of the 2018 Rita Levi-Montalcini ESICM Research Award investigated cardiopulmonary resuscitation associated lung oedema (CRALE). This translational study included a porcine model of cardiac arrest and resuscitation and a multicentre cohort of adult out-of-hospital cardiac arrest patients. Results showed that CPR was associated with lung oedema that was more severe after mechanical vs. manual chest compression. The study has been published in the February issue of the *American Journal of Respiratory and Critical Care Medicine*.

Members of the TEM Section Alain Cariou and Jerry Nolan participated in the preparation of the Position Paper on “The cardiac arrest centre for the treatment of sudden cardiac arrest due to presumed cardiac cause”, issued by ESICM in collaboration with the European Society of Cardiology (AVCV), European Association of Percutaneous Coronary Interventions (EAPCI), European Heart Rhythm Association (EHRA), and European Resuscitation Council (ERC). The paper has been published in the November 2020 issue of the *European Heart Journal of Acute Cardiovascular Care*.

To provide informing evidence for the prognostication section of the Post-Resuscitation Care guidelines, an ESICM-ERC collaborative group has carried out an extensive systematic review on predictors of neurological outcome after cardiac arrest. The first part of this systematic review focused on predictors of an unfavourable outcome included 94 studies on more than 30,000 patients, and it has been published in the October 2020 issue of *Intensive Care Medicine*.

The ESICM TEM and NIC sections collaborated with the European Resuscitation Council (ERC) in the preparation of the **ERC-ESICM guidelines on Post-Resuscitation Care**. The guidelines have been published in the April issues of both *Intensive Care Medicine* and *Resuscitation*.

Several ESICM TEM members participated in the **TTM-2 trial**, comparing TTM 33 °C vs. fever control only for

neuroprotection after cardiac arrest. The trial has been published in the No 384 issue of *The New England Journal of Medicine* (June 2021).

To provide informing evidence for the prognostication section of the Post-Resuscitation Care guidelines, an ESICM-ERC collaborative group has carried out an extensive systematic review on predictors of neurological outcome after cardiac arrest. The first part of this review has been published in the October 2020 issue of *Intensive Care Medicine*. The second part of the review is in preparation and it is planned for publication in the second half of 2021.

Several ESICM TEM members are participating in the multicentre randomised controlled trial **TAME**, comparing normocapnia vs. mild therapeutic hypercapnia in resuscitated comatose patients.

TEM has joined the translational biological (**TBG**) section within ESICM. The establishment of the TBG Section will be an opportunity to promote basic and translational research and collaboration across ESICM sections in the field. The TEM member in charge of TBG is Giuseppe Ristagno (Milan, Italy).

The TEM Deputy Chair, Sophie Hamada, has been appointed as the ESICM representative in **NIGHTINGALE** (Novel InteGrated toolkit for enhanced pre-Hospital life support and Triage IN challenginG And Large Emergencies). NIGHTINGALE is a multidisciplinary project aimed at developing advanced technology tools to optimise procedures and methods for pre-hospital life support in mass disasters.

### EVENTS

On March 30 2021, the TEM Section hosted a **Webinar on Post-Resuscitation Care**. The webinar presented the 2021 ERC-ESICM guidelines on Post-Resuscitation Care, published on *Intensive Care Medicine* that month by ESICM and ERC on ICM and Resuscitation, respectively.

The TEM section is organizing a **Webinar** entitled **What is the impact of TTM 2 on post Resuscitation Care?** to comment on the results and the clinical implications of the TTM 2 trial, recently published in *The New England Journal of Medicine*.

TEM has actively participated in the preparation of the programme for the **34th Annual Congress ESICM LIVES** (02-06 October 2021). The event includes several sessions on cardiac arrest, post-resuscitation care, and trauma, plus several other participations in intersectional (multidisciplinary) sessions. In the choice of the speakers, we promoted the participation of young and female speakers.

Planned topics for **2022 webinars** will include ultrasound in multiple trauma and prognostication after cardiac arrest.



## 4. EDUCATION & TRAINING COMMITTEE



**FRANTISEK DUSKA**  
 CHAIR, ESICM EDUCATION & TRAINING COMMITTEE

Education and Training Committee (ETC) – formerly Division of Professional Development comprised of:

- THE EXAMINATIONS COMMITTEE
- THE E-LEARNING COMMITTEE
- THE CLINICAL TRAINING COMMITTEE
- THE COBA FACULTY/COBA FORUM
- THE EDITORIAL & PUBLISHING COMMITTEE

**The overarching objective of the ETC is to provide educational activities that are accessible, affordable and relevant to our members. We understand education as a link between scientific progress and delivery of care to our patients that matter most.**

Education is aligned with assessment and therefore the ESICM offers examinations that are fair, robust, reproducible and prestigious to boost careers of intensivists in Europe and beyond. Lastly, CoBaTrICE provides an up-to-date training framework by defining competences of fully qualified intensivist and offering training syllabus that aims to serve as a template of training syllabi in Europe. Indeed, the ETC has had a challenging time as all of these activities were influenced by spreading pandemics that not only impaired the delivery of all types of face-to-face education and examination, but also required a significant refocusing of the ETC activities to training personnel not normally working in intensive care in the C19\_SPACE programme.

### THE EDIC EXAMINATIONS COMMITTEE – EDIC NOW ALSO IN ONLINE AND HYBRID FORM

The aim of the ESICM examination for the European Diploma in Intensive Care Medicine is to promote standards in education and training in intensive care medicine in Europe and across the world. The exam is intended to be complementary to specialist postgraduate medical training and the taking of the two components of the exam should correspond to stages of experience/training in Intensive Care Medicine. The aim of the written exam (EDIC Part I) is to test the specific theoretical Intensive Care Medicine knowledge, whereas the oral part (EDIC Part II) aims to test the competencies, expertise and professional conduct at the end of the specific training (2-3 years) in Intensive Care Medicine.

The paper based EDIC I exam was sat by 274 candidates in 7 centres in Europe, Dubai and Kolkata, but EDIC II had to be cancelled in 2020. To make the exam deliverable under all circumstances without losing its robustness, reproducibility and reliability, the Examinations Committee dedicated 2021 to preparations to the transition of both parts of the exam to online form. Both parts of the exam were then successfully conducted online in the late Spring 2021: 461 candidates sat part I and 168 part II. The next series is planned for Fall. The main challenges for the future are to consolidate new form of examination, maintain its high standard, increase throughput and remove barriers.

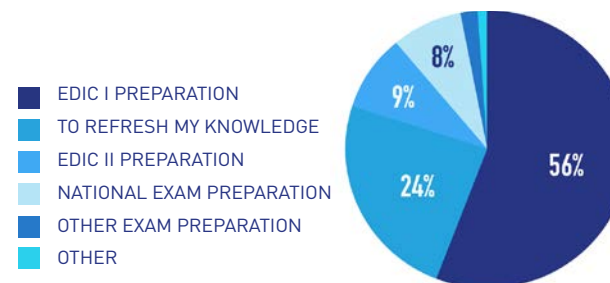
### THE E-LEARNING COMMITTEE

The difficulties of face-to-face meetings and international travel made e-learning even more important. The platform – ESICM Academy ([www.academy.esicm.org](http://www.academy.esicm.org)) currently contains 83 ACE Courses (unit of topics designed for self-paced learning and formative assessment), but also a lot of supportive content for exam preparation courses and master classes (see opposite).

The new look, fully accredited ESICM Academy and the ACE Courses continue to be among the most accessed of the Society's educational initiatives. In January 2020, a new analytic questionnaire was added to newly published or updated ACE courses. 24 ACE courses have been newly published or updated since then. In June 2021, an analysis showed that the 24 courses alone received almost 11,000 new enrolments. The true figure for enrolments for all 83 courses is likely to be many times that figure. The reason members accessed the ACE courses is highlighted in the Pie Chart (see opposite).



**Hybrid EDIC part II exam.**  
 The examiners were gathered at one centre, rotated through exam stations and interacted online with examinees



### Principal reasons why learners enrolled in the 24 ACE courses (Jan 2020 – Jun 2021). Analysis performed by Leafnet.

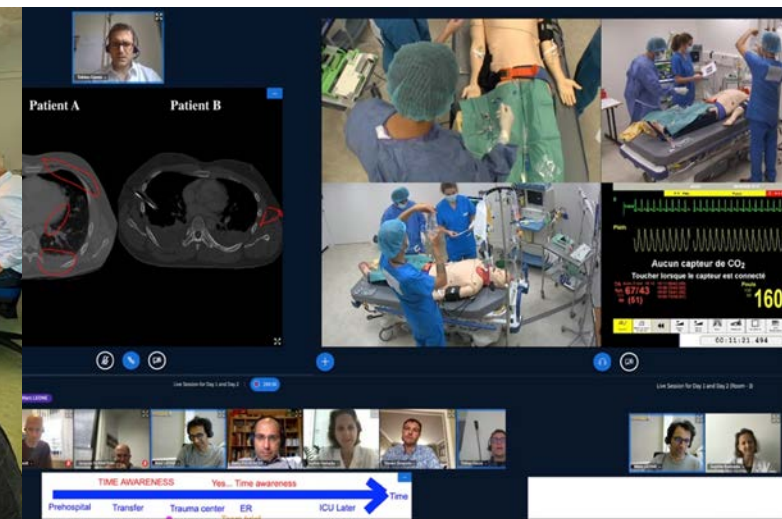
This alignment of ACE Courses and their Intended Learning Outcomes, with the CoBaTrICE competencies which, in turn, align with the EDIC blueprint, reinforces the comprehensive nature of the Society's educational endeavours. It also highlights the pivotal role the ESICM Academy plays in delivering this educational package, as well the alignment of the ACE courses with the needs of the membership.

### CLINICAL TRAINING COMMITTEE

The Clinical Training Committee (CTC) is primarily responsible for the development of educational courses and Master Classes for the Society. The focus in 2021 has been on adapting the Master Classes and educational courses to the challenges of the pandemic.

As a result of the success of the online Master Classes in 2020/2021, a hybrid model of master classes has been developed, that will be further tailored to a post-pandemic situation. Hands-on aspects of learning will be happening in the ESICM Educational Centre in Brussels, or at LIVES conferences whilst the participants are interacting from home for the more theoretical parts. The setup of these online classrooms is more than just a webinar. We have learned to create interactive, high-quality sessions with up to 80 learners in this way, guided by the expertise of the ESICM office staff.

The Masterclasses are now an established part of the ESICM educational track. They use a variety of state-of-the-



**Action coordinated from the ESICM Educational Centre in Brussels, whilst the experts and participants interact from home.**

art education tools and have a high instructor to candidate ratio, with a diverse multi-professional faculty. The courses are fully accredited by the European Union of Medical Specialists (EUMS) with participants receiving Continuous Medical Education (CME) points, and are compliant with MedTech Ethical Business Practice. Eighty-nine percent of participants rated master classes in 2021 as very good or excellent and said they would recommend them. All our planned master classes were fully booked and we work hard to deliver more based on the needs and requests.

Master Classes in 2021 have included two editions of Mechanical Ventilation: State of the Art, two editions of Haemodynamic Monitoring, The Art of Trauma Care, two editions of Sepsis and Severe Infections, End-of-Life Care, Renal Replacement Therapy in ICU and Perioperative Care. So far over 700 participants joined our master classes this year.

The EDIC I and II Preparation Courses – now also established in digital format – will, for the very first time be run twice a year, before both the Spring and the Autumn exam sessions.

### THE COBA FACULTY/COBA FORUM

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. CoBaFaculty (the CoBaTrICE Steering Committee) and the CoBaForum (the CoBaTrICE network), which includes representatives from each participating European country, continue to be vital platforms for exchanging ideas, and for promoting and enhancing the discipline of intensive care medicine in Europe. The main task for these groups in 2021 was to update the CoBaTrICE syllabus, which is now awaiting EC approval. The CoBa group will now focus on creating an e-CoBaFolio, an electronic portfolio interlinked with the ESICM Academy, where trainees and their trainers can track progress.

DAY	TOPIC	TOTAL VIEWS	TOTAL REACHED
18 FEB	SSC Guidelines	20.8K	109.4K
25 MAR	Mechanical ventilation in acute hypoxemic respiratory failure	18.8K	206.7K
22 APR	High Flow Oxygen (HFNO) for COVID-19 patients and beyond?	17.9K	105.4K
8 APR	Vasopressor Management in Septic Shock: General Overview and Personalized Approaches	17.8K	98.1K
30 MAR	2021 ERC-ESICM Guidelines on Post-Resuscitation Care	14.5K	45.8K
7 JAN	The new SARS-COV2 variant: reports from the frontline in the UK	15.2K	38.3K
15 APR	Wich haemodynamic monitoring tool?]	14.5K	45.8K
29 JUN	30 mins with Prof Gattinoni	13.9K	14.8K
22 MAY	Marathon 2021	12.9K	20.7K
29 APR	High Flow Nasal Oxygen in acute respiratory failure	12.8K	73.1K
7 SEP	How to assess fluid responsiveness	11.2K	61.8K

## 5. EDITORIAL AND PUBLISHING COMMITTEE (AKA COMMUNICATIONS)



ADRIAN WONG  
CHAIR, ESICM  
EDITORIAL & PUBLISHING

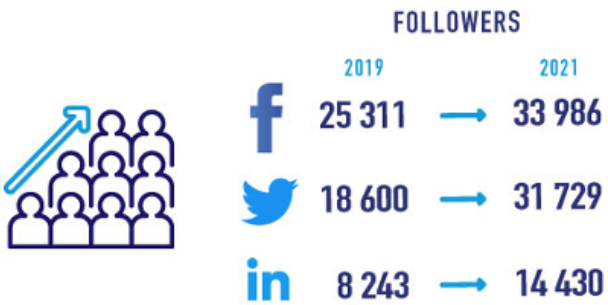
It is with a mixture of sadness and excitement that I write what will be the last report for the Editorial and Publishing Committee.

For those unaware, the Society has just approved a round of reorganisation of the various committees in line with its new set of values. This committee will be reorganised into the Social Media and Digital Content Committee. Partly accelerated by the COVID-19 pandemic, it reflects the evolving work that the committee does and hence it is amp opportunity to reflect and look forward.

Broadly speaking the EPC had two remits – coordinating the communication workstream of the Society and promoting excellence in clinical practice through the development/approval of guidelines/manuscripts etc.

The Society continues to produce high-quality educational content through an expanded range of media – the webinar continues but have now been joined by Instagram and our own podcast #ESICMtalks. Working together with our partners, including our journals ICM and ICM Experimental, I’m confident that these platforms will continue to grow and engage. As illustrated in the figure below, our webinars now attract viewership far more than what is possible in traditional face-to-face meetings.

With regards to clinical guidelines, the Society made a major shift in the way these are produced. It moved towards a more coordinated approach by focussing on a small number of guidelines in a more coordinated and strategic manner. Values such as diversity and supporting younger colleagues are addressed and I have no doubt that this approach brings a greater level of transparency and robustness to the final product. The first 4 of these guidelines include aspects on the use of ultrasound, fluids, antibiotics and mechanical ventilation – core issues in Intensive Care. The process will again be further refined with the addition of the new Methodology group within the Society.



In conclusion, the lesson of the last few years is that the way we communicate as a Society (to our members, colleagues and increasingly, the public) is crucial. Intensive Care Medicine is a team, and we are there for our patients and families. We need to be responsive and inclusively represent our speciality, whilst promoting clinical excellence. The Social Media and Digital Content Committee will be a better place to take on this massive task.



## 6. THE NEXT COMMITTEE



**STEFAN SCHALLER**  
CHAIR, ESICM NEXT  
COMMITTEE



NEXT represents the younger members of the European Society of Intensive Care Medicine and attracts trainees and young specialists to the society.

This report represents the fifth term of the NEXT committee since its founding at LIVES 2012 in Lisbon. COVID19 has unfortunately brought a halt or delay to several activities of the committee which are intended to promote exchange.

An example of this is the fellowship programme which is still cancelled. Nevertheless, 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 of the society, representing a significant portion of ESICM members. Aside from enabling virtual and real mobility across Europe NEXT is involved in nearly all facets of the ESICM with a congress track that is particularly interesting for young specialists and trainees, and research grants dedicated to young researchers. In the past year, NEXT has, thanks to ESICM leadership increased its participation in educational and scientific groups of the society.

### LEADERSHIP

This was the second year of Stefan Schaller's leadership working from Berlin, Germany, together with Laura Galarza, the Deputy Chair of the Committee. The Committee is dedicated to serving the society and its young members and to helping shape the future of intensive care medicine. In 2021 the election of a chair-elect will take place in accordance with the new statutes.

### 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. This is another event that has been suspended due to travel restrictions. The ESICM President and CEO agreed to hold a "fall" meeting in 2021 instead and have invited all members-elect and elected members.

### e-MOVE

The e-MOVE project brings to life the futuristic idea of an electronic platform, providing information for intensivists on the move. The platform was launched four years ago, and since then has been constantly improved and updated bringing you new initiatives and job-market opportunities. We would like to provide research (exchange) opportunities by working closely with the newly founded section Translational Biology. In the future, e-MOVE shall serve as a dynamic tool facilitating mobility.

### THEMATIC FELLOWSHIPS

The NEXT Fellowships have grown to become among the most visible and popular activities of the NEXT Committee. More than 400 'NEXTers' from the society have taken advantage of this opportunity to gain a unique one-week work experience in a centre of excellence of their choice. Postponed in 2020 due to the COVID pandemic, we hope to have the programme up and running again in 2022.

### RESEARCH AND AWARDS

Research is a special focus of the new NEXT leadership and so we are looking to have a close cooperation with the Research Committee. NEXT contributes to the award selection process every year to help ensure a fair screening process. Furthermore, together with the Research Committee and DPD, NEXT is supporting the cross-committee process of an educational track for research which will be launched in 2022.

### 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 has always been a congress highlight, and will certainly continue to attract members' interest. This year e-LIVES will be a whole new experience. We have worked hard to provide not only interesting content and fantastic speakers but also new ways to engage with our members and audience. New in 2021 is the "A star is rising" programme giving a platform to NEXT researchers to talk about their research.

### MENTORING V 3.0

We have developed this last year a structured mentoring programme. For the first time, we put in place an application process, resulting in 10 NEXT members being matched with a mentor from the sections. The programme lasts 2 years and includes a continuous evaluation element. Mentees receive free access to [e] LIVES during that time.

### C19 SPACE

C19\_SPACE was funded by the European Commission to train healthcare workers with no ICU experience to be deployed to the ICU during a second COVID-19 wave. This was also an opportunity to introduce young trainees to the fascinations of intensive care medicine. NEXT participated in the C19\_SPACE task force as well in the creation of content.

### NEW PROJECTS IN 2020-2021

- NEXT has been heavily involved in supporting webinars on a variety of topics in addition to the NEXT webinars (e.g. on leadership topics)
- Visual abstracts: NEXT has published a visual abstract of a published research paper each month, distributed through social media.
- NEXT Quiz: NEXT has published a quiz question each month, distributed through social media.
- ESICM talk by NEXT & ICM: NEXT has created podcasts in collaboration with ICM by interviewing authors of papers selected by ICM.
- ICMx Social media team: Members of the committee supported the ICMx social media team.
- Open calls: The ESICM leadership provides opportunities for NEXT participation in all projects including ESICM guidelines, the antibiotic stewardship app etc. For this, we established open calls through a NEXT e-blast to find motivated NEXT members to participate in those opportunities. In the last year this has included two guidelines and the antibiotic stewardship app. This shall be extended to educational and other opportunities.
- NEXT organised its first town hall meeting with the ESICM president to give NEXT members the opportunity to ask questions to the ESICM leadership.

## 7. NURSES AND ALLIED HEALTHCARE PROFESSIONALS (N&AHP) COMMITTEE



**JOHANNES MELLINGHOFF**  
 CHAIR, ESICM N&AHP  
 COMMITTEE

It has been another busy year for the ESICM Nurses & Allied Healthcare Professionals Committee which continues to be active in promoting our profile within the Society.

In my second year as Chair, the Committee I lead enjoys a proactive membership of nurses, physiotherapists and other Allied Health Professionals.

The N&AHP Committee consists of:

- **JOHANNES MELLINGHOFF**  
N&AHP CHAIR
- **MARGO VAN MOL**  
CONGRESS COMMITTEE REPRESENTATIVE
- **NIKOS EFSTATHIOU**  
RESEARCH COMMITTEE REPRESENTATIVE
- **MARTA BOROWSKA & ANNE SOPHIE DEBUE**  
ICU APP DEVELOPMENT
- **KATERINA ILIOPOULOU**  
ESICM'S JOURNAL REVIEW CLUB
- **CAROLE BOULANGER**  
N&AHP REPRESENTATIVE FOR E-LEARNING/  
DEVELOPMENT

### CONGRESS

The first remote ESICM LIVES congress continued our year-on-year increase in active and increasingly collaborative participation across all aspects of the programme, including live and on-demand sessions. The new format provided the opportunity for much wider participation across the different sections of the society and allowed an increase in the number of speakers.

The N&AHP Abstract Award Programme 2020 saw a slight decrease in the number of abstracts submitted compared to the previous year. Our representative Margo Van Mol has shown a great amount of flexibility with the development of the current congress programme which continues to be delivered remotely this year. It promises to be an exciting 3 days in October, continuing the success of last year using some newly thought-out delivery and engagement concepts.

### AppIC

The N&AHP app, 'AppIC', launched at LIVES Vienna in 2018, under the expert guidance of Marta Borowska, Anne-Sophie Debue and the AppIC team. We are seeing increasing numbers of users across the entire multi-professional team, with more than 5400 user accounts registered on our system. In particular, our engagement in the C19\_Space pandemic education programme has seen the use of the app increase significantly due to its unique offering for new intensive care staff. Further content is being developed for paediatrics and physiotherapy and translated into 5 European languages but has been delayed due to the pandemic. For the future of AppIC, we plan to see more language options, the use of videos, and of course more evidence-based content. The intention for AppIC is to be integrated into the Academy and a "Fundamentals of Critical Care" course.



### RESEARCH

With the publication of the DecubICUs project (2020) - an epidemiologic point-prevalence study on pressure ulcers in ICUs, accepted as an ESICM Trials Group Study - a lot of further work into the collected dataset is being proposed. Pressure ulcers lie right at the heart of NAHP topics of interest and as the pandemic has shown is an area that will require further attention.

Last year's Family & Partnership Research Award has been won by a nurse researcher undertaking a qualitative research study to understand the family and caregiver experience of COVID-19. This is the first time the qualitative research methodology won a Society award and is therefore not only a great achievement for the investigators but also indicates that a qualitative research study has a place in the scientific agenda of the Society.

### EDUCATION

N&AHP members are continuing to actively contribute to the Journal Review Club, led by N&AHP Committee member, Katerina Iliopoulou. The N&AHP blended learning programme of 2020 "Hot Topics" once again delivered an interesting blend of topics relevant to ICU NAHPs but also our medical colleagues. Registration rates were topping 1200 participants delivering on our commitment to provide free education on up-to-date topics.

Furthermore, in conjunction with our European network, we developed a specialist nursing track for the EU funded C19\_Space pandemic education programme, teaching non-critical care staff the fundamentals of intensive care nursing principles. The roll-out of this initiative was so successful that it was extended by 5 months enrolling nearly 10,000 participants into the nursing track of the programme. This is the biggest initiative the NAHP committee has been involved in, and

we should be very proud of our contribution to pandemic planning and education initiatives across Europe during these unprecedented times.

NAHPs continued its involvement in Master Classes which were held remotely during 2020/21. An increasing number of participants benefit from reduced fees when enrolling in these educational initiatives and we continued to see an increase of experts and participants with N&AHP backgrounds throughout the year. Shared learning across professional boundaries continues to be popular and reflects how care is provided in clinical practice as teams.

Throughout 2020/21 ESICM has continued to deliver educational initiatives focusing on COVID-19 with a particular focus on a systems approach. The recent Covid-19 Marathon once again showed NAHP commitment to participating in these events either in the form of presenters or in terms of our social media support. There is a lot to learn from our professional experiences during the pandemic and the impact we had on patient and family care and teamwork.

The N&AHP committee continues to enjoy significant support from the ESICM office and Executive Committee. Despite the continuing challenges due to the pandemic, I am delighted to report another year of successful N&AHP activities. In addition, we have been very excited to hear that the Honorary Membership of the Society 2021 is being awarded to Stijn Blot for his work and commitment to the N&AHP group over the last decade, including his ongoing support for research and educational activities. As the Chair, I would like to thank the Committee and all N&AHP members for their unfailing support and hard work, the Executive Committee and all at the ESICM Brussels office for their assistance, expertise and commitment, without whom we would not be able to deliver the many activities within the Society.



## 8. THE INTENSIVE CARE MEDICINE (ICM) JOURNAL



**GIUSEPPE CITERIO**  
**ICM JOURNAL,**  
**EDITOR-IN-CHIEF**

While the vaccination programmes currently in progress are cause for hope and offer some perspective, in 2021 the intensive care community has continued to be on the frontline of the COVID-19 pandemic and so has our Journal, Intensive Care Medicine (ICM).

**The number of submissions to the ICM journal increased by 16% compared to the usual trend.**

We are proud to confirm that the ICM journal is one of the fastest publications in the critical care track: The median interval from submission to first decision, including papers immediately rejected and manuscripts sent out for review, is 5.3 days. Thanks to Springer, our Publisher, we are also very fast in the interval from acceptance to online publication (15 days), with a final PDF immediately indexed in PubMed.



Despite the difficulties continuing also this year, we never bypassed the high-standard ICM evaluation process, with an early in-house evaluation by two three editors followed by an external peer-review process. These achievements would not have been possible without our valued reviewers. The ICM journal invited more than 4800 reviewers in 2020 and most of them completed their reviews in fewer than 8 days. ESICM members willing to join the team of reviewers and support the journal with their expertise are welcome.

During the pandemic waves, the ICM journal has continued to support critical care professionals by keeping them updated and by discussing how intensive care units (ICUs) of the future—as well as our research models—need reform after this pandemic. To quickly update the community on the latest relevant COVID-19 research, a new, ad hoc, section titled 'What's new in COVID-19', has also been created. Moreover, ICM has served as a forum for communicating emotions and experiences, in the "From the inside" section, now assigned to a dedicated Editor, Aoife Abbey.

As announced last year, we have put in place some changes in the iconographic image of the Journal and started publishing visual abstracts and podcasts, posted on the ESICM website and distributed through the Society's and the Journal's own social media outlets in Facebook and Twitter. The choice to entrust the management of the Journal's social media accounts to a

professional user has proved very successful: We doubled our Twitter mentions during 2020 (49709 mentions) and also in 2021, we are registering a comparable trend (26137 till June 30th). Moreover, an impressive number of articles have been downloaded from the journal's website, more than five million during 2020 (+250% vs. 2019) and more than 2.3 million from the beginning of 2021, demonstrating a worldwide interest in our journal.

From the strategic point of view, the ICM journal has further bolstered its relationship with ESICM, by promoting the joint development of guidelines useful at the bedside. As of today, four guidelines are already in the pipeline, fluid therapy in the ICU, echography head to TOE/TEE, ARDS definition and treatment, and practical antibiotic stewardship. Our pipeline also includes the latest version of the Surviving Sepsis Campaign (SSC) Guidelines, planned to be published by the end of the year.

Finally, the ICM journal has invited as Guest Editor for 2021 a colleague from China, Professor Haibo Qiu, who has been involved in the early management of the pandemic, to further strengthen our ties with the Chinese research community.



In 2020, the ICM journal has further consolidated its reputation and confirmed a top-ranking position in the critical care field, with an impact factor of 17.44, 3rd journal in the Critical Care category, and the first journal entirely devoted to critical care medicine.

The ICM journal will continue to strive for excellence and to serve as a beacon in the storm for the intensive care community. As Haruki Murakami wrote in his novel "Kafka on the Shore" "... once the storm is over... you won't remember how you made it through, how you managed to survive. You won't even be sure, whether the storm is really over. But one thing is certain. When you come out of the storm, you won't be the same person who walked in. That's what this storm's all about."

Please, feel free to suggest any improvements, topics and ideas that can help us make this journal feel more like your Journal. Let us know (to [icm@unimib.it](mailto:icm@unimib.it)) what you would like to read in your journal, @yourICM.

## 9. THE INTENSIVE CARE MEDICINE EXPERIMENTAL (ICMx) JOURNAL



**NICOLE JUFFERMANS**  
ICMx JOURNAL,  
EDITOR-IN-CHIEF

Follow us to stay up-to-date  
@ICMexperimental!

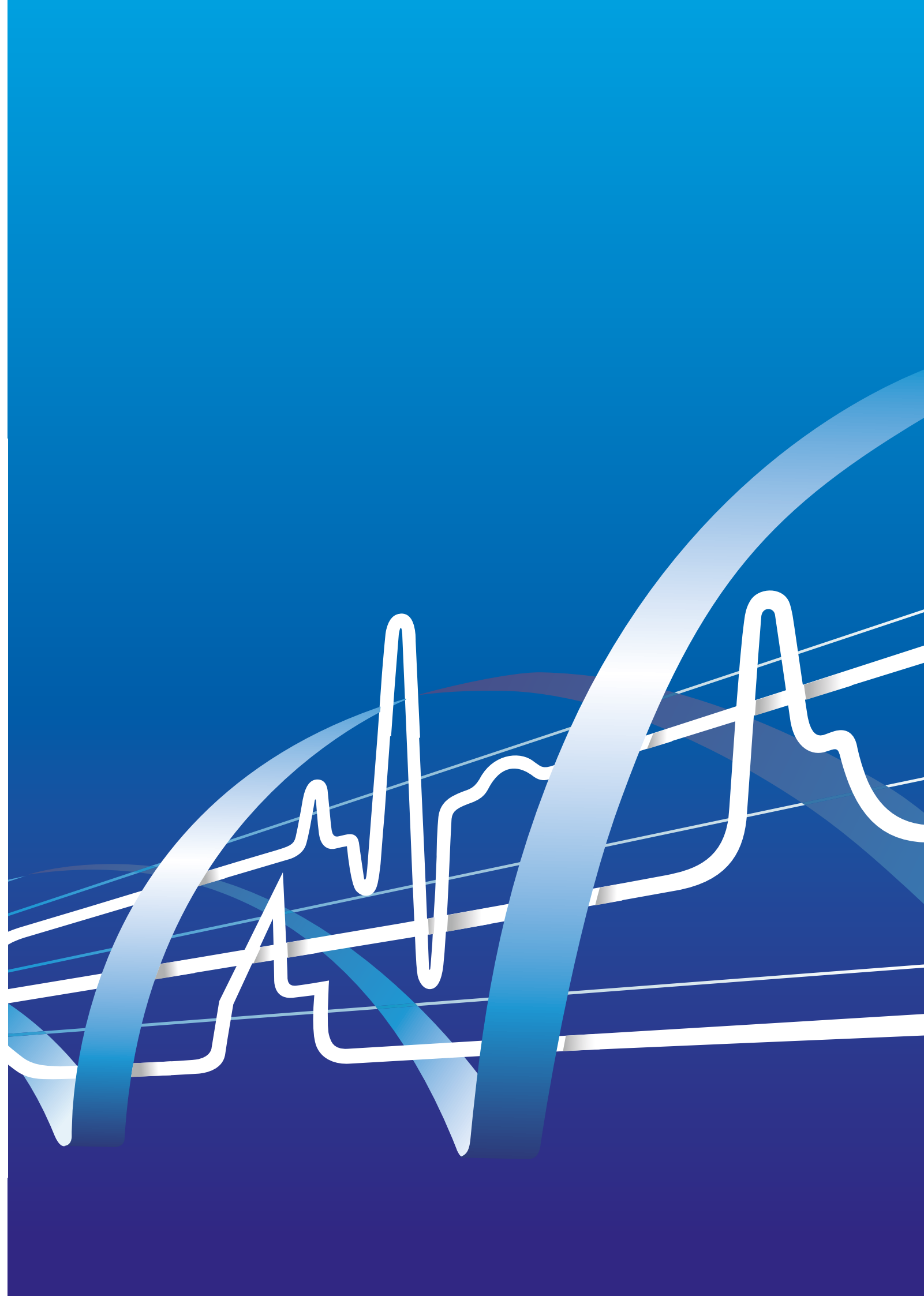
During this half year, the Editorial Board of ICMx welcome several new members. Francis Roland from Berlin is an expert on mechanical ventilation and Sascha David an expert on sepsis. The Board also welcomes Andrea Ortiz and David Perez Torres from Spain, our new social media editors.

In collaboration with the SoMe office of ESICM, a social media campaign was launched in March 2021. ICMx will promote submissions through Twitter. Follow us to stay up-to-date @ICMexperimental!

The ICMx Board has had two online meetings in which the mission and vision of providing a stronger focus on promoting translational research was shared. The Board recognizes that the success of the journal depends on the quality of the papers submitted, as well as on a smooth submission process. A number of measures have been taken to improve turn around. We have increased the reviewer pool by actively recruiting enthusiastic reviewers. Existing reviewers were now asked to renew their interest to review and to indicate their area of interest in the editorial system. In this way, reviewers are 'burdened' only with papers that are potentially of interest to them. Finally, a clear reviewer classification system has been put in place in the editorial system.

### FORECAST FOR THE SECOND HALF YEAR

We aim to publish 'road map papers', which summarize the state of knowledge in specific areas and highlight knowledge gaps. We perceive such papers to be useful to anyone interested in the development of novel therapies or in improving existing therapies for the critically ill. A number of reviews about hot topics have been commissioned and are expected to be submitted in the fall of 2021. As an example, one of these papers will address the question of whether a biological definition of sepsis is possible, and if so, what this definition should be. Experts in the field collaborate with members of the SSC and of the SIS section of ESICM on this topic: Stay tuned to ICMx!





## 10. THE GLOBAL INTENSIVE CARE COMMITTEE



**MERVYN MER**  
**CHAIR, ESICM**  
**GLOBAL IC COMMITTEE**

The past year has brought with it enormous challenges and constraints related to the COVID-19 pandemic with many entirely caught up with COVID-19 tasks and commitments.

**Despite having to curtail various planned exciting initiatives, several other meaningful, important and relevant enterprises and collaborations were still undertaken and facilitated by the Global Intensive Care Working Group (GICWG) of ESICM. Numerous communications, calls, telephonic meetings and inquiries took place relating to projects, collaborations, papers, initiatives, advice and for support purposes.**

A host of publications in excellent peer-review journals and emanating from or involving members of the Global Intensive Care Working Group and its work, also occurred during the year. These papers were accepted for publication in journals such as Intensive Care Medicine, The Lancet, Critical Care Medicine, Critical Care, the South African Medical Journal, the American Journal of Tropical Medicine and Hygiene, and Infection, amongst others. GICWG members were also involved in two very relevant reviews on Severe Malaria, and HIV in the Critically Ill Patient, which were published in Intensive Care Medicine in 2020. A recent paper involving several GICWG members pertaining to Essential Emergency and Critical Care – a consensus among global experts – has been accepted for publication in BMJ Global Health. The topic itself (EECC) was reviewed and was a formal presentation agenda item at the last face-to-face GICWG meeting. Interactions with various respected organizations and representatives thereof, including WHO, GSA, African Sepsis Alliance, SCCM, MSF and others have taken place and been fruitful. An approach to the GICWG has also recently been made by the Global Health Special Interest Group of ANZICS/CICM. Several interactions and collaborations on various projects and publications related to COVID-19 by various members of the GICWG have also taken place. Mervyn was a steering committee member on the African COVID-19 Critical Care Outcomes Study (ACCCOS) which related to the biggest to date study on critically ill patients with COVID-19 in Africa. Several relevant and important findings were shared in this study which was published in The Lancet recently. Extensive discussions on COVID-19 have occurred across all continents on a regular basis. GICWG members were invited international advisors of the Task Force that compiled recommendations for COVID-19 in low-and-middle income countries. Several members also contributed to these recommendation papers. Regular virtual meetings with input from members of the GICWG were also held to address COVID-19 elements and clinical management issues in Pakistan. This was a spinoff of the excellent ALIVE Sepsis course that was held in Pakistan just prior to the advent of the COVID-19 pandemic.

The latest Surviving Sepsis Campaign guidelines which have been completed and which is awaiting publication, has GICWG members as part of the panel. Input into the guideline was very well received. Assistance, involvement and dissemination of information for ESICM endorsed

projects such as the DecubICUs study and Eurobact study has also been facilitated by the group. Several members have delivered extremely well-received presentations at various congresses and on virtual platforms around the world, as well as being invited to deliver talks and presentations at well-respected institutions. GICWG representation occurred at such meetings as the World Sepsis Congress, WHO meetings, including direct interviews with senior members of WHO, and a specific invitation for a CHEST webinar explicitly addressing LMICs.

The book on “Sepsis Management in Resource-limited Settings by members of the Global Intensive Care Working Group has now been downloaded 89 000 times! This is a remarkable achievement. The book contains the recommendation papers and expanded versions thereof, that were previously published by the GICWG of ESICM – the first such recommendation papers pertaining to LMICs. It is hoped to review and update these moving forward. Similarly, the unique book “Clinical Examination Skills in the Adult Critically Ill Patient” to which various members of the group contributed, has been downloaded close to 30 000 times – just as an e-version of the book – and received a multitude of excellent independent reviews. The book is also available in hard and soft cover. An outstanding ESICM LMIC and ALIVE three-and-a-half-hour webinar was held in 2020. Several GICWG members participated as well as invited guests. The entire programme was put together by the GICWG. There was wonderful support from the ESICM leadership and executive who were also involved. The webinar was extremely well-received, informative, educational and moving. There was significant follow-up and excellent feedback post webinar by many interested parties. This was to our knowledge the first detailed and dedicated webinar addressing COVID-19 and LMICs. GICWG representation also occurred at the excellent 2020 ESICM LIVES Congress.

During this time, and with the inability to continue with the conventional live presentation and bedside clinical teaching format of the exciting ALIVE Sepsis initiative, the opportunity was taken to review, revise and update all the content of this unique project. A massive and special thank you to all the fabulous contributors and the fantastic review and editorial team. Various standard operating procedures and checklists have been added and updated to the course organizational aspects as well, in order to further optimize and ensure the efficient and smooth running of future courses. Unfortunately, the live courses planned for Mongolia and the Caribbean could not take place due to COVID-19. Gracious thanks to the Society for their ongoing support of this project. There is very little doubt that this is an exceedingly special, meaningful and important initiative. Nothing like it exists and it has the potential to impact very positively on many lives and health care systems around the world.

We look forward to continuing with this super venture in a very enthusiastic way, and to see how it may be further developed, shared and optimized.

The bulk of the focus of the Global Intensive Care Working Group over the past many months has been on the fantastic COVID-19 ALIVE course which has focussed specifically on LMICs. This has been an absolute success with enthusiastic, wide and superb uptake. The course comprises lectures, webinars, reading materials and a single best answer MCQ test (before and after) with formal ESICM certification post successful completion of the course. The collaboration, course setup, assessment evaluation and all components has been simply exciting, enthusing and meaningful. Very gracious thanks to all involved and in particular to Melania Istrate and her great team, the ESICM President and executive for their outstanding support, and the entire ESICM team who have been so splendidly involved. The course faculty comprises members from around the globe. The course will continue until the end of the year, or longer as may be deemed necessary. There are already requests to translate the course into other languages. Feedback to date has been simply amazing! To our knowledge, this unique course is the first such course of its kind offered globally.

GICWG members have most recently also been contributors to the ESICM antimicrobial app and are also working on contributions to chapters for an upcoming ESICM book on Ethics in the ICU. Grateful thanks are extended for the opportunity to participate and contribute to these great initiatives.

The impact of the group continues to spread, and amongst the invitations received is one to present the educational initiatives and how the group can help resource-constrained regions – meeting to be held in Angola in December 2021. There will also be GICWG member representation at Sepsis 2021.

Several exciting ventures are planned moving forward which we will continue to approach with heightened enthusiasm, vigour and passion. We would like to extend our most sincere and gracious thanks to ESICM, all the wonderful members and all those involved in the organization. We feel privileged to be part of this group and Society. Finally, we wish all well and would like to pay homage and tribute to all the marvellous health care workers and heroes around the globe for their admirable and magnificent work at all times. We look forward to LIVES 2021 and a fantastic year ahead, as well as to meeting in person again soon!



*The Intensive Connection*

## **TREASURER'S REPORTS** (FISCAL YEAR 2020)



## DEAR COLLEAGUES

Members of the Society, this is my annual Treasurer's report for the business year 2020.



**JEAN LOUIS TEBOUL**  
ESICM TREASURER

**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.

That 2020 has been an extraordinary year is a known fact. The disruption of our core business activities brought about by the COVID-19 pandemic has been tremendous and unforeseen, requiring swift adaptations and momentous decisions.

I must introduce this report by acknowledging Joel Alexandre, ESICM Chief Executive Officer (CEO) and the whole ESICM Office for their professionalism in providing winning solutions to this unprecedented challenge. Without their unfailing commitment and generous efforts to contain our losses, via both operational savings and prudent use of our reserves, the financial results of the year could have been catastrophic.

Accounting and tax advice services are provided by our professional consulting 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 organization 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.

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 2020 below.

Despite the difficulties linked to COVID-19, the balance sheet is clearly positive by 18,000 euros, due to reduced expenses but also to income from new activities such as webinars supported by the industry and which provided valuable scientific information (in particular on the COVID-19 management) to members without charging them more than their annual membership fee.

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.

## ESICM BALANCE SHEET 2020

### 2020 FINANCIAL STATEMENTS Balance Sheet, as of 31<sup>st</sup> December

	2020 Eur	2019 Eur
Financial assets		
Tangible fixed assets	1 943 505	2 030 491
Intangible fixed assets	124 903	91 793
<b>Total Non-current Assets</b>	<b>2 068 408</b>	<b>2 122 284</b>
Accounts receivables and other receivables	-867 380	-144 783
Prepaid expenses and accrued income		
<b>Total Current Assets</b>	<b>-867 380</b>	<b>-144 783</b>
Short-Term investments	5 418 469	5 418 469
Cash at bank and in bank	1 462 705	1 062 643
<b>Cash on hands and in banks</b>	<b>6 881 174</b>	<b>6 481 112</b>
<b>Deferred charges and Accrued Income</b>	<b>-159 201</b>	<b>-127 744</b>
<b>Total Asset</b>	<b>7 923 001</b>	<b>8 330 869</b>
Accounts payable		
Other short-term liabilities	1 430 119	806 701
Taxes	254 925	208 323
Deferred income and accrued expenses	1 302 103	1 255 896
Others	-1 142 521	
<b>Total Current Liabilities</b>	<b>1 844 626</b>	<b>2 270 920</b>
Mortgage loan		
Long-term provisions	20 000	20 000
<b>Total Long-term Liabilities</b>	<b>20 000</b>	<b>20 000</b>
General funds	6 039 946	5 990 119
Net result for the period	18 429	49 830
<b>Total Reserve Funds</b>	<b>6 058 375</b>	<b>6 039 949</b>
<b>Total Liabilities and Reserve Funds</b>	<b>7 923 001</b>	<b>8 330 869</b>

### Income Statement for the year ended

	2020 Eur	2019 Eur
LIVES Congress	242 120	2 878 975
LIVES Congress Sponsors	591 860	875 300
Other Conferences	83 549	238 911
Courses Registration	121 525	192 989
Exams Registration	168 315	533 199
Membership	1 231 017	1 223 935
Journal of Intensive Care	771 883	851 940
Sponsors – Unrestricted funds	613 000	152 000
Sponsors – Research Awards	5 000	100 000
Others	22 210	33 189
<b>Other revenues</b>	<b>3 850 479</b>	<b>7 080 438</b>
Lives Congress	563 726	2 981 978
Research Awards	225 000	320 000
Forum, Webinars ....	271 537	419 483
Journal of Intensive Care	313 226	311 448
Education	106 345	545 091
Overheads		
Legal, Consultancy, and Audit Fees	60 194	47 883
Marketing and Communication	199 719	201 669
IT platform & Academy	234 926	251 838
Booth and Promotion	37 779	98 661
EC and others Meetings Costs	18 433	71 629
Research Activities	108 755	160 551
EU Advocacy/Policy and Public Affairs	138 455	
Education and Scientific Activities		
Other expenses		
<b>Total Operating expenses before staff cost and building</b>	<b>2 278 095</b>	<b>5 410 231</b>
Personnel	1 145 245	1 071 650
Building costs	144 629	191 355
Depreciation	141 939	246 416
<b>Operating result</b>	<b>1 431 813</b>	<b>1 509 421</b>
Financial income	0	0
Financial expenses	122 142	110 956
<b>Financial result</b>	<b>122 142</b>	<b>110 956</b>
<b>Exceptional income and expenses</b>		
<b>Net result</b>	<b>18 429</b>	<b>49 830</b>





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**KEY EVENTS 2022**





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# LIVES 2022

35<sup>TH</sup> ANNUAL  
CONGRESS

22-26 OCTOBER

# PARIS

[www.esicm.org](http://www.esicm.org)



## GET MORE FROM YOUR SOCIETY

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