ESICM
Annual Report 2014
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REPORT FROM THE PRESIDENTS
REPORT FROM THE PRESIDENTS

As we look back on the last twelve months, it is with great pride that I reflect on what we have achieved as a Society, knowing that our membership is growing and our investment in research and education will continue to be a priority in the years to come. My mandate as President has come to an end and I now hand the responsibility over to my successor, Daniel, who will be steering the Society with great diligence and commitment. It was a humbling experience to have served ESICM for the last two years and I thank all of you for the support and guidance given to me.

During this year, we made changes to our Statutes, which were approved by the General Assembly in Barcelona. Many of these changes are necessary to keep our Society alive and to expand and will allow us to continue to grow in terms of our membership and structure. For the first time, our membership has passed 7,000. We have launched a Department Membership, which offers several unique benefits such as a customised booklet for patients and their families and a personalised website for the entire department. These are of use not only to the department, but also the end user.

LIVES 2014 was a truly international gathering, with over 6,000 attendees from more than 100 countries from every continent. 1,000 lectures were delivered by world-renowned experts and more than 1,100 original presentations were discussed in oral or poster corners. Three sessions were devoted to the first presentation of results from 16 large prospective randomized trials and two mega cohorts. If this wasn’t enough, our new congress app was launched and allowed delegates to navigate, interact and watch sessions they may have missed or wanted to watch again almost immediately after the lectures took place.

Our Trials Group is now an established and evolving network of ICUs across the world. We recognised their tremendous efforts at the congress and presented our numerous and fruitful research programmes to date. The dynamic and innovative force behind the NEXT membership has created several brand new programmes to support mentorships, fellowships and mobility opportunities for the next generation of physicians and researchers. This drive can only nurture what is already a large and dedicated group of young professionals, who are our future.

Our sections are active and the following pages bear witness to their drive and commitment. We wish to thank everyone who has had an input into our activities and wish you all the best for the coming year.

Jean-Daniel Chiche
President

Daniel De Backer
President-Elect
DIVISION OF
SCIENTIFIC AFFAIRS
Report of the DSA Chair

September 2013- September 2014

The set of reports from the ESICM Sections, the Research Committee and the Systematic Review Unit highlight the activities on all fronts - at Section level, as well as Division level. As always, hard working, collaboration and creativity have been the key words for the successful year past.

CONGRESSES AND CONFERENCES

LIVES 2013, the 26th ESICM Annual Congress (Paris, October 2013) has been a success due to several reasons.

We had a very high quality congress with 10 parallel sessions and 1890 presentations in 368 sessions featuring 296 Faculty members, as well as 26 industry-sponsored sessions. With 7 Postgraduate and Refresher Courses taking place at the same time as the congress, the ESICM Annual Congress has consolidated its place among the largest congresses in Intensive Care Medicine worldwide.

More than 5700 participants from 104 countries attended LIVES 2013 in Paris. This is a clear confirmation of the trend of growth experienced during recent years. Over the years, the success of our congresses has stemmed from a few key ingredients: international experts who animate an original scientific programme with their lectures and debates; active members and participants who present abstracts and interact during sessions; and the support of our industrial partners.

Having mentioned the abstracts, we move to the following issue: the presentation of cutting-edge original research, which is also one of our priorities. We are pleased that out of the 1,322 abstracts submitted 1,106 have been selected to be presented in either oral or poster format.

We recently decided to eliminate paper posters, to provide benefits for congress delegates, such as the elimination of unnecessary printing and/or shipping costs. Electronic versions of all posters, as well as all the invited lectures, are available online (indefinitely!) on the ESICM website. Next to this, the most recent editions of the congress, the LIVES series, have added another vital element to ensure continual growth and success.

Innovation: the addition of many high-tech elements – from the highly popular Poster Corners to our Smartphone application and interactive voting system - have strengthened ESICM’s evolution into a modern, integral professional society and increased the overall impact of our annual congresses on the intensive care field.

LIVES 2013 featured several new developments, including a NEXT Lounge with a parallel scientific programme and a specially-designed ‘NEXT Day’ programme for trainees and young specialists. We are proud to report that in Paris our featured e-Posters and Poster Corners within the scientific exhibition drew a record number of participants into the exhibition areas.

Moreover, our sponsors have extended their support of the exhibition by sponsoring industry-sponsored sessions, poster corners, lanyards, the NEXT Lounge, smart phone applications other activities. Many collaborative efforts amongst experts and industry partners have been the fruit of initial connections and continued networking at our annual congresses, and to this end, we endeavour to continue to foster activities that allow these vital alliances to flourish.
The organisation of the regional conferences is another important activity of the Congress Committee. In May 2014 ESICM organised “Cardiac Arrest: From CPR to Recovery”. Participants listened to a series of educational lectures on the management of cardiac arrest. Cardiac arrest is among the leading causes of death worldwide and is a frequent cause of admission in ICU.

Through this symposium, ESICM, along with European Resuscitation Council, brought together all professionals implicated in the care of cardiac arrest patients in order to share experiences of health care professionals concerned by the chain of survival and to examine recent data and therapeutic advances that could change our practices. Experts described the most frequent complications observed in post-cardiac arrest patients and discussed the results of recent clinical research in temperature control. Lastly, the ethical problems raised by recent changes in the treatment of cardiac arrest patients were presented.

Educational material is provided to conference attendees and societies’ members through flash-conferences (including slides and sound) available on the ESICM website.

I would like to take this opportunity to repeat the comments of my predecessors that it is a privilege to serve the ESICM. I want to praise the great work that is performed by our Congress team, and to stress the fact that nothing would be possible without the dedication and talent of these individuals, as well as all the members of the Congress Committee.

JOZEF KESECIOGLU
ESICM Chair of the Division of Scientific Affairs
Chair of the Congress Committee
# Sections and Working Groups

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Acute Kidney Injury (AKI)

The Acute Kidney Injury section continues to grow apace since its conception in 2010. In just four short years it has established itself as a cornerstone of the ESICM community and, indeed in 2012, it was the subject of the summer conference in Lyon, France.

Since 2012, the number of registered members has more than doubled, while members with voting rights number 217, which is almost a threefold increase! This builds on the great success of the section started by Michael Joannidis and Eric Hoste, to whom we are all grateful.

The third Critical Care Nephrology course is scheduled for Lives 2014 in Barcelona and will cover all major aspects of AKI, including diagnostic workup, prevention and therapy, with the thrust of the meeting being case based. It is hoped that the delegates will interact fully with the speakers and make this a successful event to match that of Lisbon in 2012.

The participation of the section in the development of practice guidelines is evidenced by the publication of the guidelines for diagnosis and treatment of hypernatraemia, which was a collaborative work with the European Renal Association (EDTA-ERA) together with the European Endocrinological Society.

With regards to research, the PEACE study (Prevalence in Europe of Acute and Chronic Kidney Injury in the ICU Environment), a prospective international, multi-centre point prevalence study on the epidemiology and use of renal replacement therapy for ICU patients who have kidney injury, is due to start in November of this year. This was endorsed by the ESICM and should provide interesting data from across the globe with regards to current ICU practice (Steering Committee: E Hoste (PI), M Joannidis, L Forni, M Ostermann and J Kellum).

I would urge you to participate and please contact either the chairman or the deputy of the section for further information. We are actively seeking national representatives for this study, so please come forward!

Finally we will have our bi-annual meeting in Barcelona. Please come along to hear what plans the section has and also bring your ideas! If anyone wishes to table a project, or is looking for contributors/advice or help, then let me know and this can be presented (briefly!) at the section meeting.

Looking forward to seeing you all at LIVES 2014 Barcelona

LUI G FORNI
Chair of the section AKI
Acute Respiratory Failure (ARF)

ANTONIO PESENTI
Chair of the ARF section

Cardiovascular Dynamics (CD)
In the last year as CD Section Chair I again had the pleasure to work with a very enthusiastic group and to have tremendous support from my deputy Chair Chris Hofer.
The CD section has been very active during the last twelve months. A variety of sessions for the annual congress were organised:

• Up-to-date programmes that cover a broad range of topics from pathophysiology to treatment, from macro haemodynamics to microcirculation, and from basic haemodynamic monitoring to advanced echocardiography.
• PG courses: This year in Barcelona we have two PG courses:
  - Edition 2 of a state-of-the-art postgraduate course on echocardiography and lung ultrasounds (joint with the ARF section), and
  - An advanced haemodynamic monitoring course.

The CD section has also strengthened links with the DPD and has been working on a number of new teaching activities. We have continued to develop a course on Cardiovascular Physiology. The first courses received excellent feedback and more will come.
A major multi-centre trial - the FENICE (Fluid challengEs in Intensive CarE) trial has been completed, with more than 2,300 patients enrolled. Daniel De Backer and Maurizio Cecconi, together with members of the CD section, have worked with The Clinical Trial Group to deliver a successful project. The first paper is under submission at the moment.
Another major project is the provision of revised guidelines on the recognition and management of shock. These consider the latest insights into this disease state, which is of utmost important in the ICU practice. A conference was held in March in Brussels and the paper is now being finalised.
The working groups (Echocardiography, B Cholley and Arrhythmias, G Voga and Haemodynamic Monitoring, JL Teboul) are also active.
The WG on Echocardiography has produced a curriculum for the skills needed in echocardiography by intensivists and is now working on a new accreditation process.
We would like to thank all the members of the section for their support and wish the newly-elected Chair, Jean Louis Teboul, and the deputy Chair Thomas Scheeren, every success!

MAURIZIO CECCONI
Chair of the CD section

CHRISTOPH HOFER
Deputy Chair of the CD Section
**Ethics (ETH)**

As in the preceding years, together with all ESICM sections, the Ethics Section actively participated in preparing and shaping the society’s annual congress, this year held in Barcelona. There were several sessions on continuous or pressing ethical issues in daily critical care practice, as well as in research, among others on adequate communication with patients and families, limitation of life-sustaining therapies, “emotional emergencies” in the ICU, and the growing influence of laws on intensive care medicine.

Also this year, the Ethics Section played an active role in the Regional Conference on “CARDIAC ARREST – from CPR to recovery”, held in Zagreb on May 22nd and 23rd, discussing pertinent ethical issues.

The Ethics Section continued to be enthusiastically involved in research and publication activities. Namely, Charles Sprung and co-workers concluded their project “Seeking worldwide consensus on the principles of end-of-life care in the critically ill”, the WELPICUS-Study, resulting in a pertinent publication (Am J Respir Crit Care Med). Piers, Benoit and co-workers, heading the DISPROPRICUS-Study on the perception of disproportionate care by ICU-staff, finished data collection except the data on quality of life one year after ICU-admission.

Data analysis began mid-year, and preliminary results were discussed in Barcelona. Charles Sprung and co-workers were setting up ETHICUS II, a world-wide follow-up project of the ETHICUS-Study.

Furthermore, members of the Ethics Section featured as authors, co-authors, or senior authors in several publications, for instance the ELDICUS-Study resulted in another paper on triage of intensive care patients, published by Sprung, Danis, Iapichino and co-workers in November 2013 (Intensive Care Med); the first paper on the EUROPAIN Study by Puntillo, Max, Timsit and co-workers was published in January (Am J Respir Crit Care); a paper on the usefulness of written advance directives in intensive care units by Hartog, Peschel, Schwarzkopf and co-workers was published in February 2014 (J Crit Care); a paper on the importance of word choice in the care or critically ill patients was published by Curtis, Sprung and Azoulay in April 2014 (Intensive Care Med); the second paper on the APPROPRIICUS Study by Piers, Azoulay, Ricou and co-workers was published in May 2014 (CHEST); and a paper on intensive care in patients with lung cancer was published by Soares, Toffart, Timsit and co-workers in June 2014 (Ann Oncol).


The statement of the American Thoracic Society on futility and goal conflict in end-of-life care, which Prof Jozef Kesecioglu and Elie Azoulay were asked to help contextualise, still underwent finalisation.

In summary, the Section on Ethics continued to strive and help shape the debates and decisions regarding ethical issues of intensive care medicine worldwide.

**Andrei Michalsen**  
Chair of the ETH section

**Rik Gerritsen**  
Deputy Chair of the ETH section
Health Services Research and Outcome (HSRO)

The HSRO section is devoted to research and educational activities aimed at assessing and improving the quality of care provided for ICU patients. The ultimate goal consists in improved patient outcomes as a result of optimised structures and processes in intensive care medicine. A starting point is the assessment and analysis of structures, process indicators, resources, and economic environment. Prominent examples for the work of the HSRO section are the development of the SAPS3 score, as well as two influential studies on patient safety (SEE 1 and 2).

Currently the HSRO section has 1,179 registered members and consists of three working groups:

- Working group on Quality Improvement
- Working group on Health economics
- Working group on Outcome research

Recent business meetings of the section and working groups took place in Brussels in 2013, Paris in 2013, and Brussels in 2014.

**ELOISE (European mortality and Length Of ICU Stay Evaluation):** ELOISE is an observational multicentre European cohort study. The primary aim of the study is to assess whether the patients admitted to ICUs with an Intermediate Care Unit (IMCU) in the hospital have lower hospital mortality than those admitted to ICUs without an IMCU. This study ended in 2012 and a submission to a major critical care journal is currently under review. Data was collected from 167 ICUs in 17 different European countries. Preliminary results were presented at the annual ESICM congress in Paris 2013.

**SEE 3 Study:** This multinational observational study will investigate patient safety and sentinel events during the intra-hospital transport of ICU patients. Organisational factors contributing to error are a major focus of this study. It study was launched in July 2014 with a call for participation. SEE 3 is endorsed by the ESICM ECCRN.

**“Global survey: towards a global understanding of critical care organisation and management”:** This survey aims to describe ICU organisation and management across critical care research networks around the world. It was launched in June 2013 and ran until January 2014. More than 400 responses from members of ICU networks were received. The gathered data is currently under analysis.

**Task force “Working conditions of Intensivists in the European Union”** - This task force aims to explore the characteristics and impact of working conditions of intensive care physicians in EU countries with the ultimate goal to come up with a framework to recommend models for preferable working conditions.

A very successful round table on this issue took place during the ESICM LIVES congress 2013 in Paris. 12 presentations on important topics, including: Demographics of ICM in Europe; different working patterns in Europe; How different working patterns affect the effectiveness and the cost of ICM; the European Directive on working hours; the intensivist in training; burnout; conflicts and family satisfaction; working conditions, safety culture and medical error; the impact of working conditions on physician safety and health - received from invited participants, are the basis for a document currently under preparation.
The HSRO section is very actively involved in many ESICM activities following the rules of the Society. The section contributes substantially to the programme of the upcoming annual ESICM congress 2014.

**Andreas Valentín**
Chair of the HSRO section

**Infection (INF)**

The section membership continues to increase and the section has currently 2,724 members, 217 of whom are voting members. The goal of the section is to improve knowledge, skill and behaviour related to infected patients in ICU.

- The group proposed new subjects for future LIVES 2015 and co-organised a PG course on the management of infectious problems in immune-compromised patients.
- A task force on the treatment of severe multi-resistant *Acinetobacter baumannii* infection is organised with the participation of the ESCMID.
- The infection section also participates in the new ERS/ESICM guidelines on Hospital and Ventilator Acquired Pneumonia.

Two working groups are now active: Pneumonia WG and the WG for Antimicrobial use in ICU and have organised research projects within the section:

- Three new publications based on the EURO BACT trial have been published or are in preparation about bacteraemia and candidaemia in ICU.
- The DALI project (ECCRN-endorsed, multi-centre study sampling antibiotic concentrations in more than 70 ICUs around the world) was also published in 2014. Several sub-analyses have been finalised.
- ASPICU study: Two post hoc analyses about invasive aspergillosis after acute hepatitis and cerebral aspergillosis have also been published this year.

Ongoing projects also include SMARRT study: A multicenter study of antibiotic dosing in RRT.

A survey on antimicrobial dosing practices in ICU has been completed and will be presented during LIVES 2014 (ADMIN ICU). Other studies will start very soon:

- Determinants of antibiotic use and de-escalation in ICU (DIANA-study)
- Epidemiology of Abdominal Sepsis in ICU (AbSeS-study)
- Ventilator associated event and infections in ICU

Other incidence and prevalence studies are under preparation with collaboration with other sections (SIS, NEURO), demonstrating the dynamism of the INF section.

**Jean-François Timisit**
Chair of the Infection section
Metabolism, Endocrinology and Nutrition (MEN)

Michael Hiesmayr
Chair of the MEN section

Neuro-Intensive Care (NIC)
The number of active members of the Neuro-Intensive Care (NIC) section has been constantly growing over the last two years. The last two NIC section meetings gathered 30-40 people and were productive, both regarding educational and scientific activities for the ESICM main meeting, as well as for discussing and elaborating future multi-centre collaborative observational and interventional studies.

The section, under the leadership of four of its members (Citerio, Meyfroidt, Oddo, Taccone) has developed and presented a new PG course entirely dedicated to the management of NICU patients. The two-day “Neuro-ICU Primer” will take place at the ESICM meeting in Barcelona and will gather expert speakers from ESICM and the Neurocritical Care Society. At present, online registrations are doing very well.

The section has also been very actively involved with four of its members (Citerio, Oddo, Stocchetti, Taccone) organising and co-chairing the International Multidisciplinary Consensus Conference on Multimodality Monitoring in Neurocritical Care, which took place during the last Neurocritical Care Society (NCS) meeting in Philadelphia, in September 2013.

Thirdly, the section was also involved in the follow-up and the elaboration of a Consensus Statement and a number of chapter guidelines to be published in Intensive Care Medicine and Neurocritical Care journal. A summary of this Consensus Statement will be the subject of a joint ESICM-NCS session at an ESICM meeting in Barcelona. A reciprocal, joint NCS/ESICM-NIC session will take place during the NCS meeting in Seattle, 7-10 September.

In collaboration with the ESICM TEM section and the European Resuscitation Council (ERC), the NIC section contributed to the organisation of the ESICM Regional Conference On Cardiac Arrest that took place in Zagreb in May 2014.

Publications:

Two abstracts from the NIC section won the Best Abstract Award at the two last ESICM congresses.

The study “TRansfusion strategies in Acute brain INjured patients: TRAIN Study” has received the NEXT Grant from the ESICM (25,000 EUR for two years). This grant will be officially announced at the next ESICM congress in Barcelona.

The NIC section has launched a first survey on “Transfusion thresholds in neurocritical care patients”, led by Fabio Taccone, Mauro Oddo, and Giuseppe Citerio. The preliminary results will be presented at our next section meeting.

Future trials
- Automated quantitative video pupillometry for the prognostication of coma after cardiac arrest. PIs: Mauro Oddo and Fabio Taccone. This observational study will involve 10 centres from Europe: co-investigators are all active members of the NIC section. (Scheduled start: January-March 2015)
- TRansfusion strategies in Acute brain INjured patients: TRAIN Study. PI: Fabio S Taccone. The aim of the current project is to determine whether the liberal strategy of maintaining haemoglobin concentrations above 9 g/dL is superior to a restrictive approach to red-cell transfusion that maintains haemoglobin concentrations above 7 g/dL in critically ill patients with acute brain injury. Considering a potential 5% of follow-up lost and 5% of protocol violation, a total of 4610 (2305 for each arm) is needed to complete the study. The expected study duration is four years, assuming the inclusion of 96 pts per month in 50 different centres.

The NIC section has active collaborations with the Neurocritical Care Society (NCS) and the European Resuscitation Council (ERC).

The NIC Chair and the Deputy express their gratitude to all members of the section for their essential involvement in the activities of the section.

Mauro Oddo
Chair of the NIC section

Fabio Taccone
Deputy Chair of the NIC section

ESICM Annual Report 2014
We have several active working groups within our section, including summer meetings, the EDIC in addition, we continue to support the development and update of PACT modules, ESICM. Our main activity in the role of section chair with the able assistance of Ib Jammer (Norway) as deputy. Following the recent elections, we are delighted that Michael Sander (Germany) will take the role of section chair with the able assistance of Ib Jammer (Norway) as deputy. Our main activity in the field of education has once been to ensure a major contribution to the ESICM congress programme, ensuring that peri-operative medicine topics are well represented. In addition, we continue to support the development and update of PACT modules, ESICM summer meetings, the EDIC exam and other valuable education activities of the society.

We have several active working groups within our section, including

1. **Working group on Early Web-based Anti-Infective Treatment (WG EWAIT):** Early Web-based Anti-Infective Treatment (WG EWAIT) is developing an internet-based advisory tool to support optimal antibiotic prescribing.

2. **Working group on Post-operative Delirium and Cognitive Dysfunction (WG PoDeCoD):** Research activities include an EU funded biomarker development project for post-operative cognitive impairment (www.biocog.eu). The website of the PoDeCoD-WG (www.podecod.org) has been renewed and expanded. The group has also been working on a series of clinical guideline initiatives and exploring new methods of monitoring delirium including EEG based tools for delirium detection.

3. **Working group on Goal Directed Hemodynamic and Volume Therapy (WG GDT):** The working group on Goal Directed Hemodynamic and Volume Therapy (WG GDT) is developing research proposals relating to improved peri-operative haemodynamic therapy. The EuSOS study proposals were developed by this group to collect pilot data for research in this field. This year the ICU CardioMan Study received ECCRN endorsement and was successfully performed. Publication is planned by the end of the year.

4. **Working Group on Abdominal Problems (WGAP):** WGAP continues to actively develop projects including a recent multi-centre study to define GI symptoms prospectively and to relate them with outcome. The group published a consensus paper with definitions on gastrointestinal function in intensive care patients. Other activities include preparation of the survey on GI problems, discussions on the bowel management protocol and PACT module update as well as planning the iSOFA (intestinal-Specific Organ Function Assessment) Study.

**RUPERT PEARSE**
Chair of the POIC section

**MICHAEL SANDER**
Deputy Chair of the POIC section

**ESICM Annual Report 2014**
Systemic Inflammation and Sepsis (SIS)

Sepsis is the number one cause of mortality in intensive care units worldwide. Sepsis care varies widely between different hospitals and between different countries, and is frequently inconsistent with published guidelines.

There is great room for improvement in sepsis care. It remains unknown which national system delivers the best results for patients and which can be improved.

The section has several aims:

• To describe the regional differences in administered treatments and the compliance with the recommendations of the Surviving Sepsis Guidelines
• Benchmarking
• To improve sepsis care across Europe using an audit tool
• To describe areas of improvement in sepsis treatment for the future
• To describe the epidemiology of severe sepsis and septic shock in Europe.

In 2014, the section is still supporting a European Multi-centre Randomised Controlled Study on the early hemodynamic resuscitation of septic shock: the MORESS protocol. The study is running well with regular inclusions. This project involves ICUs across Europe, but also America and the Asia Pacific region.

We expect the inclusions to be completed before the end of the year. This study has been endorsed by ESICM.

In 2014, the IMPRESS study was also launched under the supervision of the ESICM Surviving Sepsis Campaign group and the SIS section. The survey has now been completed and the database is currently being analysed. The data will probably be published before the end of 2014.

The SIS section has launched a Working Group on Severe Sepsis and Septic Shock. The Group is named: 4S WG. The project was submitted to the ESICM Division of Scientific Affairs and the ESICM office and the project has been officially approved by ESICM.

During the section meeting in Brussels last March, the first meeting of the 4SWG took place. The next meeting of the WG will take place in October in Barcelona during the ESICM Annual Congress.

The section officially met during the Brussels meeting in March. Minutes of the section meeting are posted on the SIS section website.

All relevant aspects of the section will be discussed during the section meeting in Barcelona next October.

Claude Martin
Chair of the SIS section
Trauma and Emergency Medicine (TEM)

The ESICM TEM section looks back on an active and fruitful year 2014. The most important achievement of the section in 2014 was the fact that the number of section members increased significantly from 2013 to 2014. The number of voting members increased from 97 in 2013 to 219 voting members in 2014. While 1,541 members were registered with the TEM section in 2013, the figure was 1,997 this year. The TEM section held two meetings during the annual ESICM LIVES congress 2013 and the ISICEM congress 2014.

Overall the section’s activities focused on three main topics:
- Post-cardiac arrest care
- Trauma
- Toxicology

Formation of a Working Group on the Emergency and Intensive Care of Burn Patients is underway and will most likely be realised in 2015.

The TEM section contributed to the scientific programme and faculty of the ESICM Summer Conference in Zagreb in May 2014. The topic of the conference was exclusively dedicated to the care of the cardiac arrest victim. In addition, the section members actively contributed to the programme for LIVES 2014 in Barcelona.

After the PACT module on Severe Trauma was completely revised by members of the TEM section in 2013, section representatives of the toxicology fraction were actively included in the peer-review process of the Major Intoxication PACT module.

Having started its scientific work in 2013, the TEM section could also expand its research activities in 2014. A team of young physicians with special interest in trauma care designed and conducted the European Traumatic Shock Survey (ETRAUSS). This study aimed to describe current critical care practices in the initial management of patients with traumatic hemorrhagic shock in Europe and compare these practices with contemporary guidelines. The survey closed in June 2014. The statistical analysis and drafting of the manuscript are under way.

The European-wide survey on the Current Practice of Neurological Prognostication Following Cardiac Arrest was conducted in collaboration with the Neuro-Intensive Care section in 2013. Statistical analysis, manuscript drafting and submission took place in 2014. Results are expected to be published by the beginning of next year.

Another research activity which has been launched together with the Neuro-Intensive Care section and representatives of the European Resuscitation Council (ERC) in 2014 was the performance of a systematic review and definition of practical recommendations on neuro-prognostication after cardiac arrest. The work has been successfully drafted and will be submitted to a scientific journal during the next months.

A very warm welcome again to all new members and thank you very much for your interest in our society’s and section’s activities!

Martin Duenser
Chair of the TEM section

Alain Cariou
Deputy Chair of the TEM section
RESEARCH DEPARTMENT
Report of the Chair of the Research Committee

The survey and project endorsement activities kept a steady pace with 6 survey applications reviewed. The Research Committee has also received 5 interesting projects. Some are still under discussion.

Research awards: the 2014 campaign worked beyond expectations with 119 applications which have been reviewed by a group of 129 different experts. This year there will be a new Industry Research award: the Baxter Fluid Management Award and two new NEXT Start-up Grants.

The clinical trials activities continue to develop with several studies which were very successful both in terms of ICUs participating in them and in terms of patient accrual: roughly 16,000 patients enrolled in Fenice, Impress, IC-Glossari and Lung-Safe. The ESICM Trials Group is now on track to contribute to intensive care medicine research. Selected ICUs that have accrued patients in these four studies form the basis of a successful take off of future clinical trials.

More studies are set to be open in the course of 2015: the Supernova trial (ecmo) and trials from the PREPARE project.

Research is crucial to the Society, and we are continuing to increase the level of resource we are devoting to its support. Acquiring an eCRF capability to support our researchers is just one example of the type of investment we are making.

ESICM Trials Group

A few highlights:

**IC-GLOSSARI** - Intensive care Global Study on Severe Acute Respiratory Infection). It is a multicentre, international fourteen-day inception cohort study of severe acute respiratory infections on the intensive care unit (ICU-SARI). Yasser Sakr from Jena, is the Principal Investigators. The patient enrolment is closed. Over 7000 patients were recruited and over 4,000 screened. The database clean-up and statistical analysis have started.

**Fenice** - Fluid ChallENges in Intensive CarE. This trial is under the leadership of Daniel De Backer and Maurizio Cecconi is a large scale multicentric observational trial conducted by the ESICM Trial Group and the ESICM Cardiovascular Section to identify which variables are used by physicians to trigger/indicate/guide fluid administration in critically-ill patients. The patient accrual is closed. More than 2,200 patients were enrolled.

**IMPRESS** - International Multicentre PREvalence Study on Sepsis is a one-day observational study on sepsis and septic shock carried out by ESICM and SCCM under the framework of the SSC. Launched to mark World Sepsis Day, IMPRESS aimed to determine the incidence and clinical patterns of septic syndromes on a single day (Nov. 7th, 2013) in ICUs and Emergency Departments worldwide. There Close to 2,000 patients have been enrolled.

**LUNG-SAFE** - Large observational study to UNDerstand the Global impact of Severe Acute respiratory Failure is a multicentre, prospective, observational, 4-week inception cohort study...
being carried out by the Acute Respiratory Failure section of ESICM. The aim is to prospectively assess the burden of, management and therapeutic approaches to, and outcomes from acute hypoxaemic respiratory failure requiring ventilatory support, during the winter months in both the northern and southern hemispheres. This study will specifically examine the contribution of ARDS as defined by the Berlin Definition to the burden of hypoxaemic respiratory failure. The data collection window closed on August 31st. Over 13,000 patients have been enrolled. The validation process is ongoing.

**PREPARE** - Platform for European Preparedness Against (Re) emerging Epidemics is a collaborative project involving 28 international partners with the aim of harmonising large-scale clinical research studies on infectious diseases. The goals of this EU-funded initiative are to ensure centres are prepared to rapidly respond to any severe ID outbreak, to provide real-time evidence for clinical management of patients and to ensure appropriate public health responses. ESICM is involved in dissemination, in training and education and in a number of WPs including several upcoming clinical trials.

Others studies coming up are:

**SUPERNOVA**: a study with the aim to assess Low-flow extracorporeal CO₂ removal in patients with moderate ARDS to enhance lung protective ventilation.

**PEACE**: an AKI section study focusing on the A prospective international, multi-centre, prevalence study on the epidemiology of the use of renal replacement therapy for ICU patients who have acute kidney injury and chronic end stage kidney disease.

**Jacques Duranteau**
Chair of the Research Committee
PROFESSIONAL DEVELOPMENT
Report of the DPD Chair

The Division of Professional Development has changed its structure and composition over the last year. The Education & Training Committee coordinates all professional training and educational activities within ESICM, as expressed in the revised Statutes and SOPs. The ESICM Academy was introduced in 2013 and will be implemented in future in order to facilitate the marketing of DPD activities and products.

The DPD comprises:
• The Examinations Committee (ex EDIC Committee)
• The E learning Committee (ex PACT Committee)
• The Clinical Training Committee (CTC)
• The CoBaFaculty/CoBaForum
• The Communications Committee

The Examinations Committee has successfully launched the new EDIC II exam in collaboration with the University of Heidelberg. The exam is conducted using iPad. The Examinations Committee members perform a sophisticated analysis of the results in order to evaluate the quality of EDIC I and EDIC II efficiently and timely.

EDEC exam, standing for European Diploma in Echo, has been planned and will be developed over the next year.

The E-learning Committee is being created and will work among others on completing the PACT updating process. The concept and the future of PACT as a fully-electronic resource, has been addressed too (see PACT annual report 2014 below).

The main task of the CoBaFaculty is to maintain, promote and develop the CoBaTrICE programme on behalf of the Society and to assure networking and coordination with other stakeholders. The list of CoBaTrICE competences has been revised and is being updated and presented to the Executive Committee. The list will serve as a basis for discussion by ESICM representatives within EBICM and MJCICM. The Syllabus will be updated in future. The CoBaTrICE (www.cobatrice.org) list of competencies and syllabus are available in 10 languages.

The CTC has been working on the EDIC I and EDIC II preparation courses which will be finalised next year.

The Communications Committee will present an independent report. A new member of staff has been appointed in the office in Brussels in order to support the development of a modern e-learning platform and the successful growth of the DPD.

Several occasions have been used to discuss about the possible future role of the chairs of the DPD Committees in the Council. This will be further discussed in future. The Committees of the Division will officially meet during the annual meeting in Barcelona. Minutes of these meetings will be sent to Brussels Secretariat. All relevant aspects of the DPD will be discussed during the section meetings in Barcelona next September.

FRANCESCA RUBULOTTA
Chair of the DPD

ESICM ANNUAL REPORT 2014
Communication Committee

The last year has been very successful for the communication and editorial activities of the Society.

The ESICM website is fully functional, with new features that have been implemented, such as the possibility for section chairs and deputies to communicate with their members in a very simple and efficient way. Website content is updated regularly, including news from ESICM and our journals, Intensive Care Medicine (ICM) and Intensive Care Medicine Experimental (ICMx), and video interviews with leading experts.

We also have an increasing number of reviews of selected articles from the literature, prepared by more active sections. In particular, I would like to express my sincere thanks to members of NEXT and of the N&AHP Committee for their commitment.

The number of visitors to the website has increased by 57% in the last year, from 34,116 (3,365 members) to 53,393 (4,991 members). This clearly testifies the growing appreciation we receive not just from our members, but also the medical community and the lay public. Our Society has a similar success in social media: the ESICM page has reached 4,683 “likes” on Facebook, 2,561 followers on Twitter, and 1,249 followers on LinkedIn. As per our motto, this is really an “intensive” connection!

Our Journals are in good health. ICM has increased its impact factor to 5.544 and ICMx publishes interesting papers regularly. Several important papers have been endorsed by the Society and published last year, including the clinical practice guidelines on diagnosis and treatment of hyponatraemia (Intensive Care Med 2014;40:320-31), the recommendations on neurological examination of critically ill patients (Intensive Care Med 2014;40:484-95), and a consensus statement on multimodality monitoring in neuro-critical care (Intensive Care Med 2014;40:1189-209). Other important manuscripts have been endorsed and will be published soon.

My mandate as Chair of the Communication Committee will end this year during our congress in Barcelona. I have seen the Society change in recent years and become more professional, dynamic and modern. Everybody can look at the ESICM as a reference point in the intensive care world like never before. I would like to thank all people who supported and helped me in my work for the Society, in particular Jean-Daniel Chiche, Elie Azoulay and Josef Kesecioglu, and to welcome the next Chair, Maurizio Cecconi.

Salvatore Maurizio Maggiore
Chair of the Editorial & Publishing Committee
Intensive Care Medicine

This has been another busy year for Intensive Care Medicine, regarding both quantitative and qualitative aspects. The news and major changes to be highlighted are the following:

The 2013 impact factor that reports on the number of citations ICM received in 2013 for papers published in 2011 and 2012 was published by Thomson and Reuters in late July 2014. The impact factor has increased from 5.25 to 5.54.

The number of submissions steadily increased and is expected to be over 1650 manuscripts this year (+10% compared to 2013, +30% compared to 2012). We have received very few pre-clinical submissions and all of them have been forwarded to ICM-experimental. The vast majority of the submissions are original manuscripts (full-length articles), followed by review articles (narrative or systematic reviews), short editorial pieces (what’s new papers, understanding the disease, editorial materials), images and “from the inside” papers.

New sections: Our board of reviewers and all the numerous experts strongly supporting ICM contribute to our new sections: “what’s new” papers, editorials, Understanding-The-Disease etc. We have much room for manoeuvre, as we are among the journals with highest source items/non-source items ratio. Of course, this is a huge amount of work to incite papers, incite authors and track the deadlines. However, we really believe that this is part of the ICM’s brand. It is also a very good way to react to hot topics such as Ebola disease, for which three short papers are planned for the coming days. All these are non-source items (papers that do not count for the impact factor).

A fast review process - even if the proportion of manuscripts not sent out for review has slightly decreased. The process has remained the same: 1. for papers falling in ten pre-defined criteria for initial rejection (animal data, studies without patients, minuscule studies, unstructured papers, etc), the EIC rejects without review; 2. when the EIC struggles about some submissions, but the papers is not I the previous situation, two to three editors (including the EIC) are involved in the decision to send out for review or not; 3. other papers are assigned to the section editor and are usually sent out for review (but the section editor may reject without review). The proportion of papers submitted after being rejected from another journal decreased from 40% to 30%. The acceptance rate has increased from 6% to 7%, but the number of published papers will be slightly lower, as we do not have the stock of papers that came last year from the Editor-in-Chief transition.

Some changes in the Editorial board, which will begin its third year in January 2015. The five changes are the following: Giuseppe Citerio (Monza) becomes Senior Deputy Editor, Anders Perner (Copenhagen) becomes Deputy Editor, Gordon Doig (Sydney) joins the group of section editors and Maurizio Cecconi (London) has been elected to replace Salvatore Maggiore (Rome) as the deputy of DPD, and Chair of the Communication Committee.

At the end of 2015, there will be an important changeover of editors, who will end their mandate. We can hope that at least some of them will be willing to stay on the board. I am deeply grateful for their impressive commitment to the journal, their kindness, their expertise in various fields of critical care, as well as for their reactivity which allows ICM to be one of the fastest journals. They are daily supporting ICM.
Per ESICM SOP, a search committee, designed by the Society and led by Prof. Daniel De Backer, is also currently auditing the journal and its Editor-in-Chief. Their conclusions should be communicated at the time of the Barcelona meeting.

Elie Azoulay
Editor in Chief, Intensive Care Medicine Journal

PACT / e-Learning

The Executive Committee has decided to implement a new eLearning platform to facilitate broad and modern access to the ESICM’s educational resources and the PACT modules will contribute as a start-up resource for the platform.

The PACT Editorial Board is being replaced by an eLearning Committee and the position of the new Chair has been advertised and will be filled by the Executive Committee via a Search Committee. When their mandates come to an end, the current Editorial Board personnel (the Editors) will be replaced by newly-elected eLearning Committee members.

The priorities now are:

• The appointment of the person at the office whose role will include the functions of the previous (PACT) Editorial Manager and a key role in the broader development of the Society’s eLearning platform.
• The appointment of a new Chair of the eLearning Committee – the current ‘Editor in Chief’ is at the end of his term.
• The implementation of the software (and hardware) package that will comprise the structure for the eLearning platform
• The setting up at the Barcelona Congress this year of the first meeting of the new eLearning Committee, which at the outset will comprise the current PACT Editorial Board, together with the heads of the CobaFaculty, EDIC and the Clinical Training Committee.
• The setting of realistic priorities within the new remit and purpose of the eLearning Committee, i.e. to develop and maintain an e-learning platform that powers the educational activities of ESICM.

Dermot Phelan, Editor in Chief
On behalf of the PACT Editorial Board, the management group and the Authors / Reviewers
Competency Based Training in Intensive Care Medicine throughout Europe (CoBaTrICE)

HANS ULRICH ROTHEN
Chair of the CoBaTrICE
Administrative Affairs
Report of the Secretary

We have had a good year in the Division of Administrative Affairs. There were a number of changes in the office structure with the departure of the IT coordinator and the arrival of a new person who joins the ESCIM Brussels office as DPD Content Manager.

We have continued to grow as a team and the aim is to deliver first class support to the Society and its members, and feedback has generally been very positive.

All the staff represented the Society at our Paris meeting and they will all be coming to Barcelona to help ensure that all runs smoothly, to promote the Society, to help enrol new members and to support all our current members who attend the meeting.

Joel Alexandre has continued to provide excellent leadership in the office and, after his initial work on helping drive real improvements in the financial structures of the office and business, he has taken on a number of other important challenges, including a review of the IT structures and also to ensure the staff pay structures are optimal.

The overall pay bill for the office has been reduced while delivering a more efficient service.

Elections
This year again we have held regular elections for the different positions in the DSA and DPD departments, held in accordance with the Statutes.

Also this year, the President Elect was elected by all our members and it is a pleasure to announce that our next President Elect is Professor Massimo Antonelli.

Statutes
We have done a lot of work this year on the statutes and the Standard Operating Procedures (SOPs), which were presented during our Council Meeting on March 17th 2014. These changes will ensure that our governance and regulatory structures are fit for the next 10 years.

Websites
I hope that you have all enjoyed the improvements to the website. We are continuing to develop this and make it more responsive.

Membership
The development of ESICM’s membership reflects “Progress and Innovation”. During the last three years in particular, the “progress” is reflected by the growth in membership, compared with previous years.

The total number of members has meanwhile reached the 7,200 mark.
We are also continuing to develop the other range of services we offer our members, with discounts on registration fees to the annual congress and other society meetings, annual subscription to the Intensive Care Medicine Journal and a discount for article processing in our new journal ICM-Experimental - a plethora of educational and scientific activities - and now you can get PAPERS 3 (the ideal tool for searching and organising your medical articles) for free.

We have opened up new membership categories with many people now benefiting from dual membership with their national society. We also have an increasing “family” with a number of non-European countries, including India, Australia, USA, Saudi Arabia, Brazil, Japan and the United Arab Emirates, all having more than 50 members.

GEORFFREY BELLINGAN
ESICM General Secretary
Report of the Chief Executive Officer

After two years with the European Society of Intensive Care, it is a pleasure to close our financial situation 2013 with a positive current profit of 119 K€, as detailed in the Treasurer's report. The decisions taken in 2013 were carried out with the sole objective of leading our Society towards a strong financial balance for 2014, and the future years to come, and increasing our professionalism.

The Brussels office is now stable, with eight full-time staff and two part-time. A new person will join us in September as DPD Content Manager, tasked with developing our new e-Learning Platform.

Our membership continues to grow, currently standing at around 7,200. In recognition of the importance of providing relevant services to our multi-professional membership, our priorities are to retain our current members, recruit further members in the future, and to provide members with the services they want, and need, to provide outstanding patient care.

This year was rich in research activities. We increased the number of our industry-sponsored awards with one from Dräger, one from Nestlé and one from Baxter. We will also launch two new NEXT Start-up grants worth 25,000 € each, per year.

The Division of Professional Development continues to develop the EDIC Part 1 & Part 2 exams with great success, using the new EDIC Part 2 format.

LIVES 2013 in Paris was a triumph, with more than 5,800 participants and an intensive scientific programme with 250 faculties. Industry partners continued their important support of the Society and helped contribute to the very positive outcome.

NEXT: Groups of young intensivists can, during the NEXT day, meet and exchange with senior consultants. The NEXT day and NEXT programme was a great accomplishment during LIVES 2013.

The philosophy of the Brussels office is member-oriented, striving for efficiency and professionalism, in a positive and enthusiastic manner. Our future will follow the same principles: Competent people at the right place at the right time.

I would like to acknowledge the hard work and dedication of the ESICM staff and elected officials. Thanks again for your support.

JOËL ALEXANDRE
ESICM Chief Executive Officer
Finance

I am very glad to announce that ESICM's financial is now healthy and secure. Continued significant income has come from our very successful congress, LIVES2014, in Paris, and also membership fees.

Income Repartition

The Society is, in short, in a good place, with the necessary reserves to undertake the development of our activities, to continue to enhance the website and invest in education and research.

After two years of loss, the 2013 result is +973 K€, including extraordinary revenues of 854K€, due to negotiations with the Belgian fiscal authorities.

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<th>2013</th>
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<tr>
<td>Financial Result</td>
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<tr>
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<td>0</td>
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<tr>
<td>Result</td>
<td>973</td>
<td>-445</td>
<td>-605</td>
</tr>
</tbody>
</table>

The current finances are solid and stable, despite the general crisis in European finances and economies. The value of our office building is now estimated at around 2,500 K€ and the portfolio amounts to approximately 3,084 K€. Our bank current account is close to 700 K€.
In short, the ESICM leadership, together with the input of the ESICM members and their representatives, is working hard to consolidate the ESICM as a highly-successful scientific organisation, which properly serves the needs of its associates and those of the Society at large.

For the budget 2014, we have decided to add two new NEXT start-up grants, each worth 25,000 € per year and an extraordinary advantage for our members: free access to ‘Papers’. These additions enhance the already wide range of activities which benefit members and ultimately the patients.

**Jordi Mancebo**

ESICM Treasurer
ESPNIC

This year has been another very successful year for the European Society of Paediatric and Neonatal Intensive Care (ESPNIC) reflecting the benefits of the implementation of our professionalisation strategy and action plan defined four years ago. ESPNIC 2013 in Rotterdam was, on all matrices, our most successful conference ever.

ESPNIC has focused on further developing and strengthening its strategic partnerships with European, national and international key partner societies and organisations in the scope of broadening the network and working towards the global recognition of the specialty of paediatric and neonatal intensive care, as well as serving our mission to ensure delivery of the highest quality care to critically-ill children throughout Europe. We have also consolidated cooperation with ESICM in strategic areas, in agreeing sessions at each other’s meetings and continued exchange of scientific knowledge and closely working on educational and training initiatives.

ESPNIC has worked hard to develop two major educational projects: (i) the ESPNIC European Diploma in paediatric and neonatal intensive care and (ii) the ESPNIC Academy. The main objective of the ESPNIC Diploma, planned to be launched in August 2015, is to both harmonise the quality standards and improve care for critically-ill children throughout Europe, and further afield.

The Diploma programme will determine and then assess the competencies that should be possessed at the end of a specialist training and provide opportunities to assist re-validation. It is intended to be complementary to national standards.

The ESPNIC Academy, to be launched this Autumn during our congress in Barcelona (EAPS 2014, 17-21 October 2014), is a new interactive and extensive online platform comprised a wide range of educational material (webcasts, papers, guidelines, presentations etc.) categorised and organised in such a way that all material can be searchable by keywords and/or keywords combination, downloadable, and learning self-assessed with online learning quizzes. Furthermore we have continued to develop our educational tools using, once again, the concept of multi-webcasting, allowing our members and congress participants to review many of the given lectures during various educational sessions of the past held annual ESPNIC Meetings.

Professional collaboration with the OpenPediatrics (www.openpediatrics.org) platform has also now been realised and will lead to greater online learning for all involved in the care of the critically-ill child, free at the point of access.

Our various specialised sections have been involved in several educational and research projects with consensus conferences and statements and bespoke pre-congress courses accompanying strong contributions to the scientific programme of our upcoming congresses, the 5th Congress of the European Academy of Paediatric Societies (EAPS 2014 Barcelona, 17-21 October 2014) and our first ever congress in Eastern Europe the 26th Annual Meeting scheduled 10-13 June 2015, in Vilnius, Lithuania – which for the first time will include a shared ESPNIC/ESICM section.

There has been a marked improvement in child-health papers submitted and accepted to Intensive Care Medicine and we are grateful to the Editorial board for facilitating this.
The EAPS 2014 conference is the largest of its kind in Europe, serving as a nexus for scientific knowledge in all areas of paediatrics, in which we will collaborate with two other leading paediatric societies ESPR (European Society for Paediatric Research) and EAP (European Academy of Paediatrics). This conference will advance the quality of paediatric care and training worldwide through a comprehensive and complete scientific programme and underlines excellent critical care at the heart of paediatric medicine.

**PETER RIMENSBERGER**  
ESPNIC Medical President

**ODILE FRAUENFELDER**  
ESPNIC Nursing President
NURSING AND ALLIED HEALTHCARE PROFESSIONALS (N&AHP)
ESICM encourages membership of any health professional working with intensive care such as nurses, physiotherapists and other allied healthcare professionals. Members can actively share their experience, practice and join in research or educational initiatives. The NAHP Committee meets twice a year: during the ISICEM meeting in Brussels (March) and during the ESICM Annual Congress (October).

The objectives of the Nursing and Allied Health Professional committee are to:
- Raise the profile of intensive care nursing and allied health professionals within ESICM and amongst European nurses & AHPs.
- Increase the opportunities for nurses and AHPs across Europe to attend the ESICM congress and to be involved in pre-congress activities.
- Provide support for first-time congress presenters, from abstract submission through to presentation.
- Develop networking opportunities for nurses and AHPs across Europe, both at the annual congress and through the ESICM NAHP web pages.
- Provide opportunities for nurses and AHPs to get involved in collaborative research studies.

N&AHP committee
In October 2013 a new N&AHP committee was installed. Stijn Blot was elected Chair of the current committee. The N&AHP Committee comprises: Carole Boulanger (N&AHP representative in the Congress Committee), Julie Benbenishty (representative in the Research Committee), Silvia Calvino-Gunther (who actively invites members to write article summaries for the N&AHP webpage), Elsa Afonso (who actively supports the development of the PG course for N&AHP at LIVES 2014), and Sonia Labeau (who supports the educational and research activities of the Committee).

Projects & activities
The International Nursing Advanced Competency-based Training for Intensive Care (INACTIC) study (project leaders: Ruth Endacott & Christina Jones). In order to develop competencies for advanced nursing practices in ICU we need to identify what training and assessment programmes exist across Europe. The aims of the INACTIC study are to: (i) conduct a survey of adult intensive care nursing training programmes throughout Europe, (ii) examine to what extent competency-based training has been developed, (iii) review current national educational structures, processes and outcomes in order to identify possible barriers to competency-based training.

The outcomes from the survey will allow us to identify differences in the career path for ICU nurses between European countries and propose a competency building model to address these differences.

ICCN Award 2013
Each year the ESICM Congress Committee grants an award for the best abstract submitted in the N&AHP category. The 2013 award was granted to David McWilliams, physiotherapist at Queen Elisabeth Hospital (London, UK).
ESICM N&AHP Award 2013
The journal *Intensive & Critical Care Nursing* (published by Elsevier) offers an annual award to an individual nurse who is the first and presenting author of an abstract at the ESICM Annual Congress. The 2013 ICCN was granted to A.J. McCairn, an intensive care nurse at Whiston Hospital (Prescot, UK).

LIVES 2013, Paris
The congress content included 16 educational sessions of particular interest for N&AHP. There is clearly a trend for more “nursing lectures” being incorporated in sessions organised by sections that are mainly run by physicians. The N&AHP Committee encourages this trend and hopes to further stimulate this in order to stress the multidisciplinary spirit of the Society. At LIVES 2013, around 45 N&AHP abstracts were accepted for presentation resulting in one oral presentation session and two poster corners.

LIVES 2014, Barcelona
For the annual congress in Barcelona, a Post Graduate course was developed with special emphasis on advanced nursing practice. In order to bridge the language barrier, simultaneous translation into Spanish will be provided. The PG course is open for 40 attendees. Substantial promotional efforts have been made for this course.

Research projects
Julie Benbenishty and Sonia Labeau both prepared a research proposal on defining futility levels of vasopressive therapy and pressure sores, respectively. Appropriate funding has to be found in order to launch the projects in the coming year.

Membership issues
A major goal of the current N&AHP committee is to increase the number of N&AHP members, to increase the number of abstracts submitted, and to enhance activity on the webpage. In February 2014, the number of N&AHP members was 58. At the end of August the number of N&AHP members increased up to 109.

Several actions are taken or are under development to stimulate membership and participation in the society.

- **Article summaries.** Since October 2013, summaries of recent scientific articles in the field of ICU nursing are posted on the N&AHP webpage on a regular basis. This activity is mainly triggered by Silvia Calvino, with adequate support of the Editorial & Publishing Committee of the ESICM.

- **Development of an App for nursing protocols.** From the start the N&AHP Committee had the idea to develop a textbook on nursing/physiotherapy related topics. The idea shifted towards an e-book and then towards an App in which nursing protocols could be formatted. The current status of this new project is that a dedicated team of (Committee) members will define the protocol format as well as the first protocols to be developed. It is our wish that this project could activate several members with various expertises.
- Abstract support. For several years the N&AHP Committee offers the opportunity to have your abstract preliminary sent to a Committee member for initial support in reporting, etc. Yet, this possibility is only rarely consulted. In the run-up to LIVES 2014, one abstract was preliminarily sent to the N&AHP Committee for advice/support.

- Networking opportunity at LIVES 2014. At the upcoming congress a networking session will take place in which N&AHP Committee members will outline in detail what the Society has to offer and how members can participate in this.

CHRISTINA JONES
Chair of the N&AHP Committee
The Next Committee
The current transformation of Intensive Care Medicine (ICM) training programmes in some European countries and the increasing mobility of trainees and young professional within Europe and overseas motivated the ESICM leadership to create the NEXT Committee in 2013, with the view of listening to the formative needs of residents, fellows and newly-qualified intensivists.

2013-2014 MISSION AND ACTIVITIES - The NEXT Committee aims to:

- Connect with and represent the young generation of intensive care professionals
- Represent trainees and young intensive care professionals in all structures of ESICM
- Adapt educational resources and congress programmes to meet the needs of the upcoming generations
- Provide a platform for mobility and career development opportunities
- Enlarge the young community of ESICM and prepare the next generation of ICM leaders

Internal Organisation: To fulfil our aims, during the pilot year we developed a busy agenda which required weekly online communications, monthly online meetings and two business meetings (October 2013 and March 2014). All minutes & reports will be available shortly on the ESICM website. A structured internal organisation (available in the ESICM SOPs) to promote the cross-talk with other Committee and Workgroups is currently defining internal operating procedures.

Among the developed activities are:

NEXT European Training Survey: We have investigated the current needs and objectives of young trainees and specialists through an international survey. Preliminary results encouraged the Committee to focus on three areas of interest, such as research, education & mentoring and mobility and to develop projects under the mentorship of the main structures of the Society.

Research: We wish to increase the awareness of research opportunities throughout Europe through the promotion of new ESICM research grants (NEXT Start-Up Grant available in 2014), scholarships and educational initiatives (Research PG Course at LIVES 2014). We also want to foster high-quality research training in Europe.

Mentoring: Mentoring is an established way of helping academic and clinical researchers to establish their careers by providing informed advice and counsel to enable individual researchers to achieve their full potential and thus to make a valuable contribution to quality research in ICM. We have put strenuous efforts into developing the first international Mentoring programme in Intensive Care Medicine (ICMentoring) with the invaluable help of senior experts and scientists who are world-renowned faculty members. The programme will be launched at the beginning of 2015.

Mobility: The NEXT Fellowship in Infectious Disease Management, supported by Pfizer and launched in 2014, will on September 1st open the call for applications and 35 NEXT Fellows will be hosted in seven European centres between October and December 2014. This Fellowship represents the first step towards further thematic traineeships for students and a more structured and long-term programme for the mobility of young ESICM members.

Communication: The continuous cross-talk with other structures of the Society allowed us to take part in fundamental ESICM decision-making and strategic planning for the future and to
foster the participation of young ICM doctors in the scientific aspects of the Society through both web-based resources, in the form of a dedicated NEXT webpage for junior intensivists, and monthly paper summaries on the News section.

Congress: The Committee has also increased its visibility in the members’ communities and allied scientific sections and International Societies through formal involvement of the Council members and National Societies’ Presidents in the establishment of a series of regular innovative events during LIVES, such as the NEXT Day and the NEXT Lounge, the meeting point for junior doctors, young specialists and faculty at LIVES, thus encouraging the participation of young European intensive care professionals in the ESICM Next community.

2014-2015 THE FUTURE IS NOW: In the coming year we wish to boost the recruitment of new young ESICM members and to increase their involvement in NEXT activities by bringing them even closer to the Society.

Organisation: Through the highly-successful elections in 2014 (more than 11 candidates), five outstanding new Committee members will join NEXT from October. The validation of the internal SOPs and the increased collaboration with other structures of the Society are the main objectives for 2015.

Research: A comprehensive portfolio of opportunities has been already created by NEXT and our target will be to reinforce ESICM’s decision to invest in research and research training in the form of new grants, fellowships and courses.

Mobility: An ambitious target of the NEXT Committee is to support ICM doctors' mobility across Europe through a detailed platform of opportunities, exploring regulatory, scientific and practical aspects of exchange programmes. After a preliminary review of a laboriously conceived preliminary project by the leadership of the Society, early next year we will propose to ESICM an thorough mobility project plan: ESICM NEXT MOVE, the first and only mobility programme for ICM doctors in Europe, aimed at breaking the borders of ICM and fostering high-quality collaborations in ICM in Europe through clinical and research fellowship schemes, an informative electronic platform and constant guidance from ESICM.

Education: We have obtained precious insights into the current educational needs of ICM junior doctors through the NEXT Survey and new courses, summer schools and seminars will be proposed to the Education workgroups of ESICM.

Publishing: In the coming year, we will reinforce collaborative links within ESICM Publishing workgroups and Journals (ICM and ICM-x) to support the publishing activity of young researchers and scientists, and foster the Society’s official publications amongst junior doctors by issuing serial publications highlighting future trends of ICM science and research.

Congress: After the exceptional success of LIVES, the NEXT Day and NEXT Lounge we wish to underpin our support of the ESICM Scientific Sections and to produce interactive and update sessions addressed at a young audience in the form of science days, top-notch education programmes, methodology courses and simulation workshops.

LARA PRISCO
Chair of the NEXT Committee