
ICU Volume 12 - Issue 3 - Autumn 2012 - Editorial

Gender

Even in a world full of innovation, developments and advanced intensive care medicine, there are areas and issues within the realm of critical care that are overlooked, at least on a comprehensive scale. As more studies and research projects are completed, and new experiences and knowledge are shared across the speciality, the quality and standard of intensive care medicine and processes are improving in bounds on many levels. Still though, grey areas and hidden cracks are present in the framework, many of which are being explored by researchers and physicians in the hope of resolving some questions, raising awareness of existing disparities or gaps in care, and supporting positive change.

One area of intensive care medicine that warrants further recognition and research is that of the relationship between the sex and gender of a patient and the intensive care they receive. This is the topic of focus in this issue of ICU Management, with the first article from Jennifer Innis and Dr. Arlene Bierman, from the University of Toronto, Canada, suggesting application of a sex and gender lens to quality improvement, in order for care access, quality, and outcomes across genders to be optimised. Second in our Cover Story is a stimulating article entitled "Unraveling the Effect of Gender on ICU Mortality". Dr. Irit Nachtigall and her team express the importance of a more detailed understanding of differences in clinical presentation, course of diseases, and cure processes in patients of different gender, with much of the research they present centring on response to sepsis.

This focus on the sex and gender of a patient is subsequently brought across to our Nutrition series. Here, Dr. Sandra Stapel and her colleagues from VU University Medical Center in the Netherlands describe several gender differences that relate to optimal nutrition in intensive care, including their hypothetical implications for the patient. Another specially focused nutrition piece, "Perioperative Nutrition in Upper Gastrointestinal Cancer Patients", follows, in which Prof. Christophe Mariette provides current information and advice. Knowledge of the nutritional status of individual patients in this sub-group is expressed as essential not only in identifying malnourished and non-malnourished patients, but also in allowing treatment adaptations along each step of the multimodal oncological treatment path, with standard enteral nutrition (EN) and immunonutrition serving as a complementary therapeutic limb.

As we move into our Matrix section, we look at a topic explored in our Cover Story, sepsis, from a different angle. Here, Drs. Marc Leone, Benoit Ragonnet and Claude Martin portray in comprehensive detail the proper use of vasopressors in septic shock, putting across key learning points. Following this, another infection, this time ventilator associated pneumonia (VAP) is the focal point. Drs. Andrea Coppadoro, Riccardo Pincioli, and Lorenzo Berra look at innovative strategies for preventing the infection by targeting the role of the endotracheal tube as the main pathogenic factor involved in its development. Drs. Mariam Alansari and Khalid Maghrabi from Riyadh, Saudi Arabia, write the final feature in this section, which focuses on imaging efficacy. They put forward that unnecessary chest x-rays need to be eliminated and replaced by an alternative technique. As well as suggesting guidelines for efficient routine and on demand x-ray use, they also propose ways in which future studies on the subject can be best designed.

Prof. Andrew Rhodes is the subject of our interview, which focuses on his aspirations and recent achievements as President of the European Society of Intensive Care Medicine (ESICM). Then, in our management section, I question the role of intermediate care units in reducing costs and improving outcomes, and suggest rather that efficiency could be improved by combining intermediate care and intensive care in one unit.

To conclude, our Country Focus features two articles that examine the Portuguese healthcare sector. The first, written by Paulo Alexandre Boto and Fernando Leal da Costa, assistants to the Minister for Health, provides a comprehensive overview of healthcare in the country, including a proposed sustainability plan from the national Ministry of Health. Second is a feature from Drs. Luís Coelho and João Gouveia that concentrates on the intensive care sector. They discuss recent challenges in the Portuguese sector, some of which other countries are also enduring, such as those stemming from the economic crisis and an ageing population, and look at areas where new strategies are needed.

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