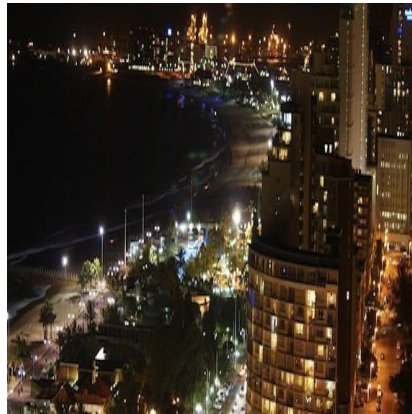




World Federation of Intensive and Critical Care Medicine Congress in Africa for the First Time



When the world's top critical and intensive care practitioners come to Durban at the end of August they will be telling a story of care that goes beyond the walls of the intensive care unit.

“Critical care should be ... ICU without walls,” explains Dr Dean Gopalan, Co-chairman of the Local Organising Committee of the conference and Head of Anaesthesiology & Critical Care Nelson R Mandela School of Medicine, UKZN. “In addition to care of patients within designated ICUs, it extends to the care that is given to any patient whose condition is life threatening and who needs comprehensive care and constant monitoring anywhere in- or outside the hospital. In developing countries it is often far less high tech than you may expect.”

The theme of the 11th Congress of the World Federation of Intensive and Critical Care Medicine, which will be held in Durban from August 28 to September 1, is ‘Critical Care for all – Providing more for less’.

The choice of theme reflects the fact that the congress will be held on the African continent for the first time, and turns the focus on the different ways that problems can be handled in differently-resourced countries.

“Critical care is often an expensive resource,” Dr Gopalan explains. “In most hospitals it can consume a big chunk of the budget for a relatively small number of patients. Funding for this can be a major challenge. This is especially true in developing countries where the emphasis is often on broader public health issues and initiatives.”

Critical care is nonetheless a vital part of the service that any hospital offers, and the Congress organisers are planning to release a Durban Declaration as a legacy for the meeting. This document will highlight different aspects of critical care that need to be addressed, in particular research, sepsis, vulnerable populations and ethics.

It is these four areas of concern that will act as a thread through the event as the scientific programme focuses on the most current issues in critical care of adults and children. The workshops, lectures and symposia will also play host to allied fields which play an integral part in the care of patients, including physiotherapy and dietetics.

The programme will include plenary lectures, thematic sessions, cutting-edge Meet-the-Expert sessions with interactive audience participation, interactive debates, clinical ward rounds, tutorials, round table meetings, hands-on workshops, industry sponsored symposia and the presentation of original scientific research in the form of free oral communications and poster presentations.

Keynote addresses will include lectures on the haemodynamic monitoring of critically ill patients; the root causes of critical illness; disaster preparedness; and strategies and solutions for antibiotic resistance. The programme will also examine the ethics of critical care as well as provide a platform for the latest, controversial studies on the fluid management in critical illness.

There will also be a strong emphasis on sepsis at the Congress.

“Sepsis is the biggest problem we face in the ICU” Dr Gopalan explains. “Patients either come in with it or they develop it in ICU because of their compromised immune systems. It is a major killer worldwide, and we are pleased that the Global Sepsis Alliance will play an important role in the programme.”

As part of the legacy of the event, delegates are being encouraged to bring books for children with them which will be distributed through Books4Africa to disadvantaged schools across the continent.

“We wanted to leave something tangible as a result of this meeting,” Dr Gopalan says. “Books4Africa was a natural fit. If every one brings a book or two with them it will be a huge contribution to the education of our children, and so much more meaningful than just putting a hand in a pocket.”

For more information about the Congress or to register for the event, go to www.criticalcare2013.com.

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