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How to manage sedation analgesia for patient-centred care in the ICU

Managing sedation analgesia for patient-centred care in the ICU



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Pain management and sedation are closely linked in the intensive care unit. In the past, clinicians were using sedative agents too liberally, often with benzodiazepines. And several issues were observed in the ICU, including the problems of delirium, weakness and prolonged ICU course.

In recent years, attempts have been made to decrease the intensity of sedation whenever possible and to put analgesia before sedation because pain control is of paramount importance. Once pain is controlled through effective analgesia, the patient can then be put on minimal or even no sedation according to the clinical team. Everybody in the critical care team must be involved and must be concerned about this.

The following is an overview of a discussion on how to manage sedation analgesia for patient-centred care in the ICU. The primary goal of this discussion is to talk about the important connection between sedation and analgesia and to find out how a balance can be achieved while ensuring deliverability of patient-centred care and humanising the patient experience in the ICU. The discussion will include input from Prof. Gerald Chanques, Intensive Care Unit, Saint Eloi University Hospital, Montpellier, France and Prof. Xavier Capdevila, Lapeyronie University Hospital, Montpellier, France. ■