

Ageing Population

Lessons From the “Very Old Intensive Care Patients” (VIP) Project, *H. Flaatten, B. Guidet, D. deLange*

In Search of a Crystal Ball: Predicting Long-term Outcomes in Critically Ill Older Adults, *S. Jain, L. Ferrante*

Nutritional Management of the Critically Ill Older Adult, *O. Tatucu-Babet, K. Lambell, E. Ridley*

Unmasking the Triumphs, Tragedies, and Opportunities of the COVID-19 Pandemic, *J. Patel, D. Heyland*

What Intensivists Can Learn From Geriatric Medicine, *A. Reid, P. Young*

Ageing and Critical Illness: What Does Quality Care Look Like? *C. Subbe, C. Thorpe, R. Pugh*

Lessons from COVID-19: ICU Preparedness, Ethical Issues and Digital Congresses, *JL Vincent*

Predicament Prevention for Pandemics, *A. Michalsen*
Challenges in the Management of Severe SARS-CoV2 Infection in Elderly Patients, *O. Perez-Nieto, E. Zamarron-Lopez, M. Guerrero-Gutierrez et al.*

Vitamin D in Critical Illness – Fifty Shades of VIOLET, *K. Amrein, P. Zajic, M. Hoffman et al.*

Angiotensin II in Post Cardiopulmonary Bypass Vasoplegia - The Experience So Far, *N. Cutler, J. Signorelli, P. Wieruszewski et al.*

Promising Techniques in Sepsis After Cardiac Surgery, *G. Paternoster, Á. Nagy*

Microtools to Identify and Resuscitate Microcirculatory Dysfunction in Critically Ill Patients, *M. Hilty, C. Ince*

The Future of Critical Care: The Human Capital, *S. Ho, A. Wong, A. Butnar, M. Malbrain*



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The process of ageing cannot be defined by a number. The World Health Organization classifies anyone over the age of 65 as elderly. However, it is important to understand that ageing is a complex process, and we must consider physiological and cognitive vulnerabilities when talking about ageing as they can make some elderly people more prone to disease and acute medical events. Also, comorbidities tend to increase with age and are associated with increased mortality. Hence, older adults are more vulnerable compared to younger people and factors such as disability, frailty, and multimorbidity increase with age.

It is estimated that by 2050, the percentage of population older than 80 years of age will double (Nguyen et al. 2011). And yet, there is limited evidence to guide the treatment and management of older adults in the ICU. There are currently no international recommendations for the admission or treatment of critically ill older patients >80 years of age. There are also no valid prognostic severity scores that would facilitate geriatric assessments (Guidet et al. 2018).

In this issue, our contributors talk about the **Ageing Population** and the treatment and management of elderly patients in the ICU. Hans Flaatten, Bertrand Guidet and Dylan deLange provide an overview of the VIP (Very Old Intensive Care Patients) project that studies patients 80 years or older. Lauren Ferrante and Snigdha Jain discuss the evidence behind the prediction of long-term outcomes in older ICU survivors.

Oana Tatucu-Babet, Kate Lambell and Emma Ridley provide an overview of recommendations for the nutritional management of critically ill older adults while Jayshil Patel and Daren Heyland talk about the deficiencies in communication and decision-making that impact the quality of care provided to older patients with serious illness.

Alice Reid and Paul Young talk about the key domains from geriatric medicine that are relevant to the practice of intensive care medicine, and Christian Subbe, Chris Thorpe, and Richard Pugh explore a system for assessing the quality of care in critically ill elderly patients.

Our contributors also touch upon the COVID-19 pandemic as critical care doctors continue to fight this battle around the globe. I talk about ICU preparedness, ethical issues during a pandemic and the pros and cons of digital congresses while Andrej Michalsen talks about the controversial and much-debated issue of scarce resources and how healthcare systems can respond to this challenge during a pandemic. Orlando Ruben Perez-Nieto and co-authors discuss in detail the challenges in the management of severe SARS-CoV2 infection in elderly patients.

We are living in an era where medical advancement has made it possible for people to live longer. At the same time, the number of older adults who are likely to require ICU care is also increasing. There is a need to adopt geriatric care models in the ICU and integrate geriatric concepts into critical care practice. Critical care professionals must master the skills that will enable them to better manage the elderly patient and to use improved assessment tools and management strategies. The number of elderly patients will continue to increase. Hence, there is a need to give some importance to ageing-related aspects of critical care to help improve the quality of care for the elderly patient in the ICU.

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