Ralf Kuhlen | Rui Moreno Marco Ranieri | Andrew Rhodes (Eds.)



Controversies in Intensive Care Medicine

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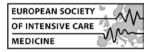
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Preface

Last year, the European Society of Intensive Care Medicine (ESICM) celebrated its 25th anniversary in combination with its 20th annual congress. On that occasion we published a book entitled "25 Years of Progress and Innovation in Intensive Care Medicine", which was given to all conference attendees and also every member of the society as an anniversary present. The feedback from our members and also from other readers of the book was extremely positive, with many requests asking us to repeat the exercise in 2008 and future years. This year's annual congress is entitled "Controversies in Intensive Care Medicine" and will be held in Lisbon, Portugal, in September. The editors, the executive committee of the society, the publisher and all the people involved with last year's project were easily convinced to accept the challenge of producing another book that will again accompany the annual conference and will be distributed to society members. As in the past year, the title of the book reflects the theme of the congress, focusing on areas of controversy within our specialty.

How should controversial issues in intensive care be presented? The first idea was to identify the topic of the controversy and then have pro and con chapters reflecting the two respective standpoints. Although this approach could have been very interesting and entertaining, we thought that highlighting the topic of the controversy within one chapter would be more helpful for the reader to understand the background and see how different conclusions may be drawn from the scientific evidence on the issue. Therefore, we were looking for authors who are not only experts in their field but who were also willing to produce an objective description of the different, conflicting views one might have on a controversial issue. We asked authors to describe the "school of thought" in favour and against an argument with equal emphasis and finally to draw a conclusion which at its best would be helpful for the reader to resolve the controversy when thinking about it at the bedside. Within

the ESICM, and also among our worldwide circle of friends and colleagues it was easy to find authors who could deliver such an article within a tight deadline. For that we are extremely grateful. It is a special pleasure for us to be able to thank all of these individuals for the excellent work they have done in preparing their manuscripts, reading and editing their chapters and especially for being as balanced with their views as possible. Without them this book would never have become a reality. We would also like to thank the ESICM office staff for their help with editing and Thomas Hopfe and his wonderful team at MWV in Berlin, Germany, especially Claudia Leonhardt and Nina Heinlein. for their excellent support from the publishing house. Without their friendly but crucial efforts to keep all of us within our timeframes we would not have been able to present the book in time for our Lisbon meeting.

The book tries to address the many controversial topics that we face within our specialty. Although we neither intended nor hoped to cover every controversy in intensive care medicine we are happy that many of the most relevant topics have been addressed. The respective chapters are organised in sections on acute respiratory failure, acute circulatory failure, acute kidney injury, sepsis and infection, neuro-intensive care, acute bleeding, organisational issues, surgical intensive care and trauma, and adjunctive issues. We hope that the readers will find their way through all of these controversial areas and learn something helpful that will be of use in daily clinical practice. We hope that you, the reader, will enjoy reading this book as much as we have enjoyed producing it!

Ralf Kuhlen (Chair of the Editorial and Publishing Committee) Rui P. Moreno (President Elect of the ESICM) V. Marco Ranieri (President of the ESICM) Andrew Rhodes (Chair of the Division of Scientific Affairs)

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A. Acute respiratory failure

