

Day 2 (8th November 08:00 – 12:00)

1. Description of ongoing collaborative work
2. Roundtable conference
 - a. What are the opportunities and obstacles for collaborative efforts
 - b. What can SSAI contribute?
3. Summary and conclusion
4. Lunch (12:00 – 13:00)

Collaborative work

“Severity of illness and short-term outcomes in Scandinavian intensive care medicine” PhD University of Bergen 2011 *Kristian Strand*



- data from SIR, Intensium and NIR

Scandinavian Octogenarian intensive care Study (SOS study). Outcome of intensive care in octogenarians and older. Started in 2012 – planned participation Sweden, Finland and Norway. Finland and Norway collected data (including daily SOFA scores) – Finland got all data for preparation. Private health problems have halted the project.

A registry meeting in Copenhagen in 2014 – participation from Denmark, Finland, Sweden, Iceland and Norway

hamonization of data sets in years to come -

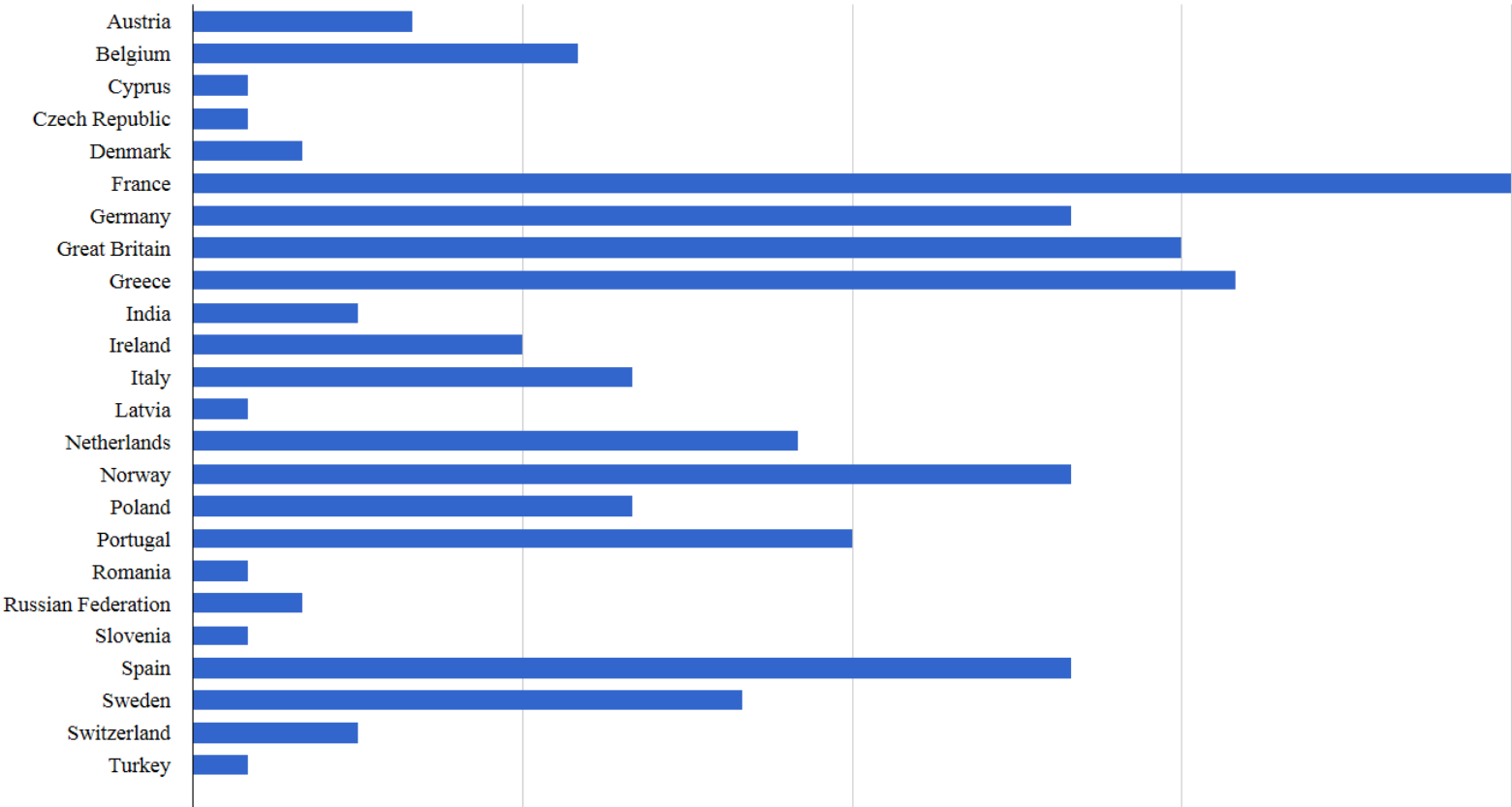
possible common research projects – a small scale start was proposed

A session on national quality registers on the ESICM congress 2015 – initiated and led by Scandinavian/Nordic colleagues

2016 The ESICM VIP1 Study A European study of the aging intensive care unit population

The VIP1 study – database in Denmark

Number of participating ICUs per country (updated 05-11-2016 17:14)



Opportunities

- Quite equal populations and health care systems
- «Open» registries (Sweden, Norway and Denmark?) – easier to share and compare data
- Personal ID number/social security numbers make it easy to track patients
 - Long-term mortality
 - Functional outcome
 - Health-related quality of life
- Combining data from different registries – perioperative and intensive care
- Together we could test out hypotheses, for instance on several outcome predictors (perhaps especially interesting in the elderly)
 - Frailty
 - Comorbidities
 - ICU factors

Groups of particular interest?

- Planned and unplanned surgery patients being admitted to the ICU after having been discharged to wards from postoperative units
- ICU patients with low severity scores dying (hidden failure factors?)
- ICU patients with high severity scores surviving (hidden success factors?)

Obstacles

- Different definitions, data sets, patient populations, scoring systems
 - Do we define an ICU patient the same way?
- Legislation? – but things are changing
- Resources?
- Interest?
- Competition?

SSAI

- Arena for collaboration
- Goal is to fulfill the goal of national societies
- CPC focuses on
 - guidelines Morten Hylander Møller
 - quality control Anna Oscarsson Tibblin

Joint meeting CPC, SSAI 6.-7.11.16

- Common end-points and risk predictions?
- New quality indicators?
 - Indications of guideline utilisation
 - Endpoints related to guidelines

New data in NIR

- Limitation of treatment
- Resuscitation
- VAP, CIM, bloodstream infections,

- SAPS III
- Complications

Iceland

- Orbit (both anaesthesia and intensive care)
- No specific database
- APACHE II, SOFA (complete scores)

Sweden (SIR)

- 2001 founded in Lund
- 2014 certification level 1

SPOR

Research project

- Surgery patients in the ICU
 - Who are they?
 - Kind of surgery? Timing?
 - Complications
 - Mortality

A new scoring system for ICU patients?

- The presently used ones are outdated

Nordic registry of surgical patients in the ICU

- Common dataset
- Chair: Steffen Christensen
- DID, DAD, SIR, SPOR, NIR, IS, Intensium
- SSAI: Kristinn Ørn Sverrison
- Anna Oscarsson
- Tabulate common variables

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SSAI project

- common variables
- Periop . to ICU (planned/emergency, time of surgery – day, night, weekdays)
- Reason for admittance
- Main diagnosis, organ failure
- Time from surgery to ICU
- ASA, comorbidity, age, SAPS
- Type of surgery
- Type of hospital regional, local, univesity

- 30 day mortality