



The Scottish Transplant Group

While you may not have actually been holding your breath you will be pleased to hear that the Scottish Transplant Group Report has recently been published. I would recommend having a look at the summaries although the winter nights, even in Scotland, are probably not long enough to encourage you to digest the whole tome.

This report does take into consideration at least some of the diverse views of the Scottish Intensive Care community. The Minister for Health and Community Care, Malcolm Chisholm, in announcing the publishing of the report stated that he wished to be satisfied that in taking the recommendations forward that they command general support. So the debate must go on.

Consent for transplantation is a difficult area but seems to be moving slightly in favour of a soft opt out system where, when relatives would be asked their view, the presumption would be balanced more towards following the wishes of the deceased. The Scottish Office also wishes that the debate progresses in Scotland concerning recommendation 8 which states that a non-heart beating donation programme might best be initiated in an Intensive Care Unit setting rather than in A&E. We have argued that this is unlikely to be the case. Recommendation 25 also

suggests that the power of advanced directives in relation to elective ventilation should be explored and consideration given in this context to possible welfare attorneys under the Adults with Incapacity Act 2000 which came into operation on 1st July 2002. Again the Transplant Group have been made well aware of the reservations which many intensivists have, both in terms of consent and resource. The report can be viewed at www.show.scot.nhs.uk

A single organ retrieval team for Scotland which would include a senior anaesthetist is proposed and is likely to get support. Hopefully such individuals can be identified

We have also had input into a new resource pack which is to be targeted at secondary schools for pupils to discuss the ethical issues surrounding transplantation. This includes intensive care as well as the other perspectives surrounding transplants.

UK Transplant intend to undertake an audit of potential donors. This rather optimistically is intended to start in January 2003. This, in pilot areas, will include all deaths in hospital but more generally all deaths in Intensive Care Units. They will aim to identify patients who may have been suitable as either heart beating or non-heart beating donors. It is important that units engage with the local Transplant Co-ordinators

and Donor Liaison Sisters to confirm that this proposed audit is acceptable to them. It should not involve the units themselves in extra work but they may wish to keep a weather eye on both the collection and interpretation of the data that might come from their unit should they agree to participate. It is important that intensive care is seen to understand and assist in the problems of transplantation while at the same time airing their legitimate concerns about the direction in which some initiatives might lead

Finally, the 3rd Scottish Symposium on Organ Donation and Transplantation will take place in the Western Infirmary Lecture Theatre, Glasgow on Monday, 31st March 2003. It would be useful to have a substantial intensive care representation at a meeting such as this to give balanced support to the recommendations of the Scottish Transplant Group Report.

Jim Dougall

To accommodate the large number of articles generated since the last edition of the society's newsletter, we have produced this supplement to edition 8.

Pil Oates, Editor

SICS Future Meetings

Research Group Open Meeting

10th September 2003

Stirling (venue TBC)

Scottish Intensive Care Society Audit Group

Annual General Meeting

Friday 31st October 2003

Education and Conference Centre, Stirling Royal Infirmary

Scottish Intensive Care Society

Annual Research Meeting

Thursday 29th January 2004

Royal Hotel, Bridge of Allan

Scottish Intensive Care Society

Annual Scientific Meeting

Friday 30th January 2004

Pathfoot Building, University of Stirling

See notice boards for local area meetings.

The Scottish Intensive Care Society Evidence-Based Medicine Group - Progress Report 2003

The SICS EBM group met on the 6th January 2003 in Stirling to review progress with critical appraisal subjects and to set new topic areas for EMB review.

In general they discussed progress within topic areas, rate limiting factors and the widening the project to involve more health care professionals. Malcolm Daniles also gave a refresher on the principles of EBM. Chris Cairns presented the web page that he designed for the EMB group which will be linked to the SICS web page in the near future. This development will allow the presentation of critical appraisal topics (CATs) along with the EBM guidelines derived from CATs. It will also have a feedback section allowing individuals to comments on the contents of the pages and suggest new topic areas for appraisal. The group is asking for volunteers to come forward to help with the next phase of topics and to develop new ones in the future (see below).

The three main topic areas agreed in October 2001 were :

1. Ventilatory strategy in ARDS - Brian Cuthbertson has undertaken the literature search and critical appraisal of 5 RCT's in this area as well as review of 14 non-randomised studies. This work has lead to the production of an EBM guideline on ventilation in ARDS will be available on the web site soon for discussion.
2. Gastric ulcer prophylaxis - Tim Walsh and Chris Cairns have reviewed the variety of RCT's and meta-analysis available in this area. This work has lead to the production of an EBM guideline which will be available on the web site for discussion.

3. Treatment of sepsis - Malcolm Daniels has reviewed 6 RCT's in the broad area of the treatment of sepsis. These include studies on activated Protein C, anti-thrombin III and glycaemic control in critically ill and these individuals CATs will be presented on the web site for readers to interpret in light of their practice.

New topic areas that we have agreed include :

1. Chris Cairns is going to look at the role of ICU management in the care of the community cardiac arrest patient. This project will run alongside an audit project that the ICU registrars group is running throughout Scotland.
2. Brian Cuthbertson is going to look at the role of inhaled NO and prone positioning in ARDS.
3. Gill Harrison is going to review the evidence for early enteral nutrition in critically ill patients after major upper GI surgery.
4. David Swann is going to review the evidence for infection control measures in preventing ventilator acquired pneumonia in the critically ill and then catheter related blood stream infections.
5. Kevin Rooney is going to review the evidence for tight glycaemic control in the critically ill.

All of these individuals are looking for help with their project and volunteers can either contact Brian Cuthbertson, Chris Cairns, the SICS offices or the individual themselves, for more information. We hope you will want to get involved.

Brian Cuthbertson