LETTER TO EDITOR OPEN ACCESS

Addressing Post-Intensive Care Syndrome: A Call to Action for Comprehensive Post-ICU Care

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Dear Editor,

The advancements in critical care medicine have significantly improved survival rates for patients admitted to intensive care units (ICUs) (1,2) However, as more patients survive these intensive treatments, a new challenge has emerged: Post-Intensive Care Syndrome (PICS). PICS encompasses a range of physical, cognitive, and psychological impairments that persist after discharge from the ICU, profoundly affecting survivors' quality of life and posing a substantial burden on healthcare systems (1,2).

PICS manifests in various forms. Physically, patients may experience persistent muscle weakness, fatigue, and reduced mobility, often as a result of prolonged bed rest and critical illness myopathy (3,4). Cognitively, survivors frequently report issues such as memory loss, impaired executive function, and difficulty concentrating (3,5). Psychologically, anxiety, depression, and post-traumatic stress disorder (PTSD) are common, with some studies suggesting that up to 50% of ICU survivors may suffer from one or more of these conditions (6,7). The significance of PICS lies not only in its prevalence but also in its profound impact on patients' lives. Many ICU survivors find it challenging to return to their previous levels of functioning, both personally and professionally (8,9). The long-term consequences can include an inability to work, strained relationships, and a diminished overall quality of life (8,9). Furthermore, the families of ICU survivors often experience emotional distress and caregiver burden, contributing to a broader societal impact (10,11).

To address PICS effectively, a multifaceted approach is required. Early identification and intervention are crucial. During the ICU stay, strategies such as minimizing sedation, promoting early mobility, and implementing delirium prevention protocols can reduce the incidence and severity of PICS (10,12). Post-discharge, comprehensive rehabilitation programs that include physical therapy, cognitive training, and psychological support are essential (1,13).

Healthcare providers must also be educated about PICS to recognize its symptoms and provide appropriate referrals for post-ICU care (3,4). Establishing dedicated post-ICU clinics can facilitate the coordination of multidisciplinary care, ensuring that patients receive the holistic support they need to recover fully (10,11). Moreover, involving family members in the recovery process and offering them support is vital, as their well-being directly influences the patient's recovery trajectory (10,11).

Policy makers and healthcare institutions should prioritize funding and resources to support research on PICS and the development of effective treatment protocols (1,12). Public awareness campaigns can also play a significant role in destigmatizing the psychological aspects of PICS and encouraging patients to seek help without hesitation (10,14).

In conclusion, while the success of ICU treatments in saving lives is commendable, it is imperative that we do not overlook the long-term consequences faced by survivors. By acknowledging the reality of Post-Intensive Care Syndrome and committing to comprehensive post-ICU care, we can improve the quality of life for ICU survivors and their families, ultimately leading to better health outcomes and reduced healthcare costs (10,11).

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REFERENCES

1. Needham DM, Davidson J, Cohen H, Hopkins RO, Weinert C, Wunsch H, et al. Improving long-term outcomes after discharge from intensive care unit: report from a stakeholders' conference. Crit Care Med. 2012;40(2):502-9.
2. Inoue S, Hatakeyama J, Kondo Y, Hifumi T, Sakuramoto H, Kawasaki T, et al. Post-intensive care syndrome: its pathophysiology, prevention, and future directions. Acute Med Surg. 2019;10(1):7-16.
3. Rawal G, Yadav S, Kumar R. Post-intensive care syndrome: an overview. J Transl Int Med. 2017;5(2):90-2.
4. Kang L, Dong R, Qi R, Zhan D, Zhou L. The clinical spectrum and pathophysiology of post-intensive care syndrome. Gen Surg Res. 2021;3(2):1025.
5. Pandharipande PP, Girard TD, Jackson JC, Morandi A, Thompson JL, Pun BT, et al. Long-term cognitive impairment after critical illness. N Engl J Med. 2013;369(14):1306-16.
6. Jackson JC, Pandharipande PP, Girard TD, Brummel NE, Thompson JL, Hughes CG, et al. Depression, post-traumatic stress disorder, and functional disability in survivors of critical illness in the BRAIN-ICU study: a longitudinal cohort study. Lancet Respir Med. 2014;2(5):369-79.
7. Tofani D, Balboni M, Cascella M. Psychological distress in ICU survivors: an overview. ICU Manag Pract. 2022;22(1):10-3.
8. Mikkelsen ME, Christie JD, Lanken PN, Biester RC, Thompson BT, Bellamy SL, et al. The adult respiratory distress syndrome cognitive outcomes study: long-term neurophychological function in survivors of acute lung injury. AM J Respir Crit Care Med. 2012;185(12):1307-15.
9. Wintermann GB, Rosendahl J, Weidner K, Strauß B, Petrowski K. Impact of post-traumatic stress symptoms on the health-related quality ill patients and their partners: age matters. Crit Care. 2019;23(1):39.
10. Harvey MA, Davidson JE. Post intensive care syndrome: right care, right now..and later. Crit Care Med. 2016:44(2):381-5.
11. McPeake J, Mikkelsen ME, Quasim T, Devilbiss T, Orme J. Outcomes after critical illness and surgery (OACIS) group. Peer support to improve recovery following critical care discharge: a case based discussion. J Intensive Care Soc. 2022;23(1):72-9.
12. Kumar N. Advances is post intensive care unit care: A narrative review. World Journal of Critical Care Medicine. 2023 Dec 9;12(5):254.
13. Profitt T, Menzies V. Relationship of symptoms associated with ICU-survivorshop: an intergrative literature review. Intensive and Critical Care Nursing. 2019 Aug1:53:60-7.
14. Gravante F, Trotta F, Latina S, Simeone S, Alvaro R, Vellone E, Pucciarelli G. Quality of life in ICU survisors and their relatives with post-intensive care syndrome: A systematic review. Nursing in Critical Care. 2024 Apr 15.