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978-0-521-87283-6 - Core Topics in Cardiothoracic Critical Care

Edited by Andrew Klein, Alain Vuylsteke and Samer A. M. Nashef

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# Core Topics in Cardiothoracic Critical Care

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Edited by Andrew Klein, Alain Vuylsteke and Samer A. M. Nashef

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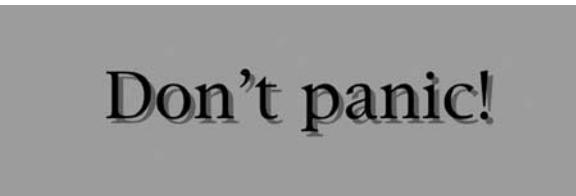
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## Preface

In the corner, a patient is recovering well after a heart operation. Even so, the lights of five infusion pumps are blinking regularly, the ventilator is sighing, the electrocardiograph, several pressures, temperature and oxygen saturation are continuously displayed and massive amounts of data are being generated and recorded, and this is when things are going well!

Elsewhere, another patient may be on an intra-aortic balloon pump, a third may be on haemofiltration, a fourth may be on a ventricular assist device and occasionally, behind drawn curtains, a mad-eyed surgeon may be performing open heart surgery on the unit due to unexpected complications.

The cardiothoracic critical care area can be a frightening place indeed.



Don't panic!

Managing the critically ill cardiothoracic patient is no different from any other patient. The principles of good clinical practice apply here as they do elsewhere. Knowing the history helps. Clinical examination, as in every field of medicine, yields valuable information.

However, critical care provides additional, hard clinical data like no other area of medical practice. Continuous and regular monitoring of physiological and haematological parameters makes most diagnoses easy to make. If there is still doubt about the status of the patient, further information is easy to obtain, whether by pulmonary artery flotation catheter, transoesophageal echocardiography or computed tomography. This is one area where most decisions are made on the basis of sound evidence rather than on a clinical hunch. All that is required is some basic knowledge, a degree of thoroughness and sound judgment.

This book aims to guide caregivers from all disciplines in the management of cardiothoracic patients during their time in the critical care environment. The work is not exhaustive nor, we hope, exhausting. It is written by experts in their fields and its primary aims are to explain and demystify the approach to various areas of cardiothoracic critical care.

We truly believe the topic of cardiothoracic critical care can be accessible and easy to learn. We hope, with this book, to have made it more so.

Thanks also to Graham Hilton for photographs, including the cover.

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## Foreword

Cardiac intensive care is a peculiarity in the United Kingdom. In many hospitals, it is the only single specialty critical care area. We should not be too surprised at this; cardiac disease is common and its frequency has spawned many new and innovative treatments. Changes in the organization of our hospitals may mean more patients with cardiac disease are treated in specialist centres and even fewer seen in general intensive care units, thus reducing the skill base and so comfort of many intensivists in managing these patients. Patients do not just present with heart disease, they also require surgery for other problems and familiarity with cardiac support is essential for all who work in general units.

This is not an in-depth tome, but rather a practical text full of the kind of tricks of the trade that make a skilled cardiac intensivist. One potential problem of

a single specialty unit is a tendency to “forget” about the other systems; these are all addressed herein, along with other essential elements such as ethics and the running of a successful unit.

This is a welcome text targeting a multi-disciplinary audience. It will be useful for those approaching an attachment to a cardiac unit as well as for those of us outside who want to update ourselves on the latest treatments available.

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# Abbreviations

<b>A</b>		<b>APC</b>	Activated protein C
<b>A-</b>	Angiotensin	<b>aPTT</b>	Activated partial thromboplastin time
<b>ABG</b>	Arterial blood gas	<b>ARDS</b>	Acute respiratory distress syndrome
<b>ACE</b>	Angiotensin-converting enzyme	<b>ARF</b>	Acute renal failure
<b>ACEI</b>	Angiotensin-converting enzyme inhibitor	<b>ASV</b>	Adaptive support ventilation
<b>ACLS</b>	Advanced cardiac life support	<b>A<sub>sys</sub></b>	Area under the systolic fraction
<b>ACS</b>	Abdominal compartment syndrome	<b>AT</b>	Antithrombin
<b>ACT</b>	Activated coagulation time	<b>ATG</b>	Antithymocyte globulin
<b>ACTA</b>	Association of Cardiothoracic Anaesthetists	<b>ATN</b>	Acute tubular necrosis
<b>ACTH</b>	Adrenocorticotrophic hormone	<b>AUC</b>	Area under the curve
<b>ACV</b>	Assist-control ventilation	<b>AV</b>	Atrioventricular
<b>ADL</b>	Activity of daily living	<b>B</b>	
<b>ADP</b>	Adenosine diphosphate	<b>BAEP</b>	Brainstem auditory evoked potentials
<b>AED</b>	Automatic external defibrillator	<b>BiPAP</b>	Bi-level positive airway pressure, bi-level pressure assist
<b>AEP</b>	Auditory evoked potential	<b>BIS</b>	Bispectral (index)
<b>AF</b>	Atrial fibrillation	<b>BiVAD</b>	Biventricular assist device
<b>AIDS</b>	Acquired immunodeficiency syndrome	<b>BLS</b>	Basic life support
<b>ALI</b>	Acute lung injury	<b>BMI</b>	Body mass index
<b>ALS</b>	Advanced life support	<b>BMR</b>	Basal metabolic rate
<b>ANH</b>	Acute normovolaemic haemodilution	<b>BPF</b>	Bronchopleural fistula
<b>AP</b>	Anteroposterior	<b>bpm</b>	Beats per minute
<b>APACHE</b>	Acute Physiology and Chronic Health Evaluation	<b>BUN</b>	Blood urea nitrogen

## ABBREVIATIONS

C		CVP	Central venous pressure
CABG	Coronary artery bypass graft	CVVH	Continuous venovenous haemofiltration
CAM-ICU	Confusion assessment method for the intensive care unit	CVVHD	Continuous venovenous haemodialysis
cAMP	Cyclic adenosine monophosphate	CVVHDF	Continuous venovenous haemodiafiltration
CBF	Cerebral blood flow	Cx	Circumflex artery (coronary artery)
CCO	Continuous measurements of cardiac output	CYP3A4	Cytochrome microsomal system isoform 3A4
CCP	Critical care practitioner	D	
CCT	Certificate of completion of training	DC	Direct current
CDC	Centers for Disease Control and Prevention (USA)	DDAVP	Desmopressin (1-desamino-8-D-arginine vasopressin)
CF	Cystic fibrosis	DHCA	Deep hypothermic circulatory arrest
CI	Cardiac index	DIC	Disseminated intravascular coagulation
	Confidence interval	DL <sub>CO</sub>	Transfer coefficient for carbon monoxide
CIS	Clinical information system	DNAR	Do not attempt resuscitation
CML	Chronic myelomonocytic leukaemia	DR	Direct radiography
CMRO <sub>2</sub>	Cerebral metabolic rate (for oxygen)	DST	Down slope time
CMV	Controlled mechanical ventilation	DVT	Deep venous thrombosis
	Cytomegalovirus	E	
CNS	Central nervous system	EAA	Excitatory amino acid
CO	Cardiac output	EBM	Evidence-based medicine
CoA	Coarctation of the aorta	ECG	Electrocardiograph
CoBaTriCE	Competency based training for intensive care medicine	ECMO	Extracorporeal membrane oxygenation
COPD	Chronic obstructive pulmonary disease	ECT	Ecarin clotting time
COX	Cyclo-oxygenase	EDIC	European Diploma in Intensive Care
CPAP	Continuous positive airway pressure	EDTA	Ethylenediamine tetra-acetic acid
CPB	Cardiopulmonary bypass	EDV	End-diastolic volume
CPOE	Computer-aided physician order entry	EEG	Electroencephalograph
CPP	Cerebral perfusion pressure	EF	Ejection fraction
CPR	Cardiopulmonary resuscitation	EHR	Electronic health record
CR	Computed radiography	EJV	External jugular vein
CRBSI	Catheter-related bloodstream infection	EMR	Electronic medical record
CSF	Cerebrospinal fluid	EPAP	Expiratory positive airway pressure
CT	Computed tomogram/tomography	EPO	Erythropoietin
CTEPH	Chronic thromboembolic pulmonary hypertension		
CVA	Cerebrovascular accident		

## ABBREVIATIONS

EQ-5D	EuroQoL five-dimension	HFV	High frequency ventilation
ESR	Erythrocyte sedimentation rate	HIT	Heparin-induced thrombocytopenia
ETCO <sub>2</sub>	End-tidal CO <sub>2</sub>	HLA	Human leukocyte antibody
EVLW	Extravascular lung water	HMT	Heparin management test
EWS	Early warning scores	HP	Haemoperfusion
F		HPA	Human platelet antigen
FEV <sub>1</sub>	Forced expiratory volume in 1 second	HR	Heart rate
FFD	Film to focus distance	HRQOL	Health-related quality of life
FFP	Fresh-frozen plasma	I	
FG	Filtration gradient	IABP	Intra-aortic balloon pump
Fio <sub>2</sub>	Fraction of inspired oxygen	IAH	Intra-abdominal hypertension
FRC	Functional residual capacity	IAP	Intra-abdominal pressure
G		IBTICM	Intercollegiate Board for Training in Intensive Care Medicine
GABA	γ-Aminobutyric acid	ICA	Internal carotid artery
GCS	Glasgow Coma Scale	ICAM	Intercellular adhesion molecule
G-CSF	Granulocytes colony stimulating factor	ICD	Implantable cardiac defibrillator
GEDV	Global end-diastolic volume	ICP	Intracranial pressure
GFR	Glomerular filtration rate	ICU	Intensive care unit
GI	Gastrointestinal	IE	Infective endocarditis
GTN	Glyceryl trinitrate	IFN	Interferon
H		Ig	Immunoglobulin
HADS	Hospital anxiety and depression scale	IHD	Intermittent haemodialysis
Hb	Haemoglobin	IJV	Internal jugular vein
HBOC	Haemoglobin-based oxygen carriers	IL	Interleukin
Hb-S	Haemoglobin S	IMV	Intermittent mandatory ventilation
HCSW	Health care support worker	INR	International Normalized Ratio
HDU	High-dependency unit	IPAP	Inspiratory positive airway pressure
HF	Haemofiltration	IPD	Intermittent peritoneal dialysis
HFFI	High frequency flow interruption	IPF	Idiopathic pulmonary fibrosis
HFJV	High frequency jet ventilation	IPPV	Intermittent positive-pressure ventilation
HFOV	High frequency oscillatory ventilation	IRV	Inverse ratio ventilation
HFPV	High frequency percussive ventilation	ISHLT	International Society of Heart and Lung Transplantation
HFPPV	High frequency positive-pressure ventilation	ISI	International Sensitivity Index
		IT	Information technology
		ITBV	Intrathoracic blood volume
		ITP	Idiopathic thrombocytopenic purpura
		ITTV	Intrathoracic thermal volume

## ABBREVIATIONS

ITU	Intensive therapy unit	MI	Myocardial infarction
IV	Intravenous	MIDCAB	Minimally invasive direct coronary artery bypass
IVC	Inferior vena cava	MMV	Mandatory minute ventilation
K		MOD	Multiorgan dysfunction
K	Clearance	MOF	Multiorgan (system) failure
K <sub>m</sub>	Membrane coefficient	MPAP	Mean pulmonary artery pressure
KPS	Karnofsky performance status	MRI	Magnetic resonance imaging
L		MRSA	Methicillin-resistant <i>Staphylococcus aureus</i>
LAD	Left anterior descending (coronary artery)	MTT	Mean transit time
LAP	Left atrial pressure	MU	Million units
LCP	Liverpool Care Pathway for Dying Patients	N	
LDH	Lactate dehydrogenase	NEEP	Negative end-expiratory pressure
LIMA	Left internal mammary artery	NF- $\kappa$ B	Transcription factor nuclear factor $\kappa$ B
LMS	Left main stem (coronary artery)	NHP	Nottingham Health Profile
LMWH	Low-molecular-weight heparin	NIRS	Near-infrared spectroscopy
LOS	Length of stay	NIV	Noninvasive ventilation
LPS	Lipopolysaccharide	NK	Natural killer (cells)
LSV	Long saphenous vein	NMDA	N-methyl-D-aspartate
LV	Left ventricle/ventricular	NSAID	Nonsteroidal anti-inflammatory drug
LVAD	Left ventricular assist device	NSE	Neuron-specific enolase
LVEDP	Left ventricular end-diastolic pressure	NYHA	New York Heart Association
LVEDV	Left ventricular end-diastolic volume	P	
LVRS	Lung volume reduction surgery	PA	Pulmonary artery
M		PAC	Pulmonary artery catheter
MAP	Mean arterial pressure	Paco <sub>2</sub>	Carbon dioxide alveolar pressure
MCA	Middle cerebral artery	PACS	Picture archiving and communication system
MCAEP	Midcortical auditory evoked potentials	PADP	Pulmonary arterial diastolic pressure
MCP	Monocyte chemotactic protein	PAF	Platelet activating factor
MDD	Major depressive disorder	PAH	Pulmonary arterial hypertension
MDE	Major depressive episode	PAMP	Pathogen-associated molecular patterns
MDT	Multidisciplinary team	Pao <sub>2</sub>	Oxygen alveolar pressure
MEP	Motor evoked potential	PAP	Pulmonary artery pressure
MET	Medical emergency team	PC	Personal computer
MEWS	Modified early warning scores		Pericardial collection
MHC	Major histocompatibility complex		Protein C

## ABBREVIATIONS

PCA	Patient-controlled analgesia	R	
PCI	Percutaneous coronary intervention	RA	Right atrium/atrial
PCP	<i>Pneumocystis carinii</i>	RATG	Rabbit antithymocyte globulin
PCR	Polymerase chain reaction	RBC	Red blood cell
PCV	Pressure-controlled ventilation	RCA	Right coronary artery
PCWP	Pulmonary artery wedge pressure	RFID	Radiofrequency identification
PD	Peritoneal dialysis	RIJ	Right internal jugular
PDE	Phosphodiesterase	RRT	Renal replacement therapy
PDMS	Patient data management system	RSTP	Risk score for transport patient
PE	Pulmonary embolus/embolism	RV	Right ventricle/ventricular
PEA	Pulmonary endarterectomy	RVAD	Right ventricular assist device
PEEP	Positive end-expiratory pressure	S	
PEG	Percutaneous endoscopic gastroscopy	SAH	Subarachnoid haemorrhage
PHT	Pulmonary hypertension	SAM	Systolic anterior motion (of the anterior mitral leaflet)
PICC	Peripherally inserted central catheter	Sao <sub>2</sub>	Arterial oxygen saturation
PMN	Polymorphonuclear neutrophils	SBT	Spontaneous breathing trial
Po <sub>2</sub>	partial pressure of oxygen	s/c	Subcutaneous
POC	Point of care	SC	Membrane sieving coefficient
PPE	Personal protective equipment	Scvo <sub>2</sub>	Central venous oxygen saturation
PPH	Primary pulmonary hypertension	SCUF	Slow continuous ultrafiltration
PPV	Pulse pressure variation	SDD	Selective decontamination of digestive tract
PRBC	Packed red blood cells	SF-36	Short Form Health Survey
PRVC	Pressure-regulated volume-controlled ventilation	SI	Système Internationale
PSV	Pressure-support ventilation	SIMV	Synchronized intermittent mandatory ventilation
PT	Prothrombin time	SIRS	Systemic inflammatory response syndrome
PTP	Proximal tubular pressure	S <sub>JVO</sub> 2	Jugular venous oxygen saturation
PTT	Partial thromboplastin time	SNP	Sodium nitroprusside
PTSD	Post-traumatic stress disorder	SOFA	Sequential Organ Failure Assessment
PTV	Pulmonary thermal volume	SPV	Systolic pressure variation
PVAD	Paracorporeal ventricular assist device	SSEP	Somatosensory evoked potential
Pvco <sub>2</sub>	Pulmonary venous CO <sub>2</sub>	SSRIs	Selective serotonin reuptake inhibitors
PVR	Pulmonary vascular resistance	STS	Society of Thoracic Surgeons (risk scoring)
Q		SV	Stroke volume
Q <sub>b</sub>	Blood flow	SVC	Superior vena cava
Q <sub>d</sub>	Dialysis flow	Svo <sub>2</sub>	Mixed venous oxygen saturation
Q <sub>f</sub>	Filtration flow		
QOL	Quality of life		

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## ABBREVIATIONS

<b>SVR</b>	Systemic vascular resistance	<b>TRS</b>	Toronto Risk Score
<b>SVT</b>	Supraventricular tachycardia	<b>TSH</b>	Thyroid-stimulating hormone
<b>SWG</b>	Standard Wire Gauge	<b>TTE</b>	Transthoracic echocardiography
<b>T</b>		<b>UF</b>	Ultrafiltration
<b>TAH</b>	Total artificial heart	<b>UTI</b>	Urinary tract infection
<b>TAT</b>	Thrombin–antithrombin complex	<b>V</b>	
<b>Tc</b>	Lymphocytes T cytotoxic	<b>VAD</b>	Ventricular assist device
<b>TCD</b>	Transcranial Doppler	<b>VALI</b>	Ventilator-associated lung injury
<b>TEG</b>	Thromboelastogram/ thromboelastography	<b>VAS</b>	Visual analog scale
<b>TFPI</b>	Tissue factor pathway inhibitor	<b>VATS</b>	Video-assisted thoracoscopic surgery
<b>Th</b>	Lymphocytes T helpers	<b>VCO<sub>2</sub></b>	Total volume of CO <sub>2</sub> exhaled over a defined period
<b>TLR</b>	Toll-like receptor	<b>VF</b>	Ventricular fibrillation
<b>TMP</b>	Transmembrane pressure	<b>VILI</b>	Ventilator-induced lung injury
<b>TNF</b>	Tumor necrosis factor	<b>VO<sub>2</sub></b>	Oxygen consumption
<b>TOE</b>	Transoesophageal echocardiography	<b>V/Q</b>	Ventilation–perfusion
<b>TPN</b>	Total parenteral nutrition	<b>VT</b>	Ventricular tachycardia
<b>TRALI</b>	Transfusion-related acute lung injury	<b>vWF</b>	von Willebrand factor
<b>TREM-1</b>	Triggering receptor expressed on myeloid cells	<b>W</b>	
<b>TRIM</b>	Transfusion-related immunomodulation	<b>WCC</b>	White cell count