

In reply to ‘‘Management of accidental hypothermia: Narrative review’’



En respuesta a ‘‘Gestión de la hipotermia accidental: revisión narrativa’’

Dear Editor:

First of all, we thank Dr. Ferrer Marrero for his interest in our article, which demonstrates the concern and growing interest of professionals involved in the management of accidental hypothermic victims, including cold water immersion and drowning.

We agree with the author the requirement of a good coordination between the rescue teams, pre-hospital emergency systems, and useful hospitals. In fact, in 1991, we already expressed this desire.¹ Since then, the criteria have changed a lot and, in the recent years, survival has been revolutionized with excellent neurological results.²

Further progress must be made in the development of structured protocols that plan rescue coordination, problem prediction, triage optimization, pre-hospital management including immediate and high quality CPR, transportation and treatment. These protocols should include; hospital choice, hospital management, detailed criteria for the use of ECMO and cardiorespiratory support and subsequent resuscitation care.³ An example of this coordination has recently been published in non-scientific press.⁴ A severe hypothermic victim in cardiac arrest in the Girona’s Pyrenees was resuscitated after 6h without neurological sequela. The victim was transported to The Vall d’Hebron Hospital in Barcelona for extracorporeal life support rewarming. This achievement originated a press release from the Spanish Society of Intensive and Critical Care Medicine and Coronary Units (SEMICYUC).⁵

Furthermore, we believe that, due to the low frequency of this pathology and the difficulty to make the good decision at the accident site, the advice of an expert in hypothermia (called coordinator in other countries) could be useful. Its effectiveness improving survival and final neurological prognosis has been reported.⁶

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Conflict of interest

The authors declare that none of the signatories has a conflict of interest.

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