Fluids | Medical Fluids 2013; 2(1): 1—3
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Editorial

Welcome to the first issue of Fluids in 2013: Do we really need another critical care journal?

Manu L.N.G. Malbrain

If you are reading this editorial, you are "looking" at the first issue of Fluids in 2013, yet another international critical care journal you may think. Is this really the case? We are very excited to present you this issue of Fluids with the meeting report of the 10th Annual Critical Care Symposium (ACCS, www.critcaresymposium.co.uk) held in Manchester at the Palace Hotel on April 25th—26th and organised by Dr Veerappan Chithambaran from the The Pennine Acute Hospitals, NHS Trust. In this issue you can find the proceedings of the invited lectures together with the abstracts of the "poster" sessions in addition to the full physician program of the conference and the workshops.

The first issue of Fluids was launched at the Second International Fluid Academy Day (iFAD, www.fluid-academy.org), held in Antwerp on November 17th in 2012 [9]. The target audience for this meeting were all specialists caring for the critical care patient: intensivists, anaesthesiologists, emergency physicians, internists, surgeons, burn care specialists, nurses and other health care workers. The participants appreciated the use of a voting system that allowed to assess the meeting learning curves [10]. The 2nd iFAD was a compact one-day course on clinical fluid management, a topic that has been neglected for a long time and provided an environment for interaction and discussion, definitions and consolidation of the knowledge in the field of fluid management and hemodynamic and other end-organ monitoring. Only recently, the medical community seems to recognise the importance of looking at fluids beyond their role in mere hemodynamic stabilization as proven by the time dedicated to this topic at international medical congresses and the recent available literature [4, 5, 12, 13]. Nevertheless, we are still far away from treating fluids as any other drug we give to our patients. The side effects are without doubt more than relevant and the associated morbidity and mortality related to poor fluid management is either caused by hypovolemia (resulting in convective problems) or fluid overload (resulting in diffusion problems with interstitial edema) with proven morbidity in all kinds of patients and diseases, both related to poor oxygen transport to the tissues [1, 8].

Founded in 2011 during the 1st iFAD meeting the goals of the International Fluid Academy (iFA) are to foster education and promote research on fluid management, and thereby improve the survival of critically ill patients by bringing together physicians, nurses, and others from a variety of clinical disciplines and backgrounds. The primary goal of the iFA is to establish an international collaboration group with the final aim to improve and standardize care and outcome of critically ill patients with an emphasis on fluids, fluid management, monitoring and organ support. This can be achieved by collaborative research projects, guideline development, joint data registration and international exchange of health care workers and researchers. The acquired knowledge and results of research will be published in Fluids (www.fluids.eu), the international journal on medical fluid management, and shared with his peer group each year during international scientific meetings like the iFAD, Frontiers in Critical Care (www.frontierscriticalcare.nl), WCACS (www.wsacs.org), and this year's 10th anniversary ACCS meeting. And there's more! Since fluid overload is no longer seen as a cosmetic problem but as hazardous and deleterious to many of our patients, a real challenge lies in the search for strategies to avoid this complication [7]. Modern hemodynamic monitoring techniques with functional hemodynamic parameters like pulse pressure variation and stroke volume variation and volumetric preload indices like global enddiastolic volume (taking us beyond the traditional static central venous pressure) can help the clinician in finding the right thresholds to guide the resuscitation and de-resuscitation process [3, 11]. The use of new and old biochemical markers can also help us to understand whether the patient will transgress spontaneously from the ebb to flow phase of shock, like the capillary leak index (CLI) that can be calculated by dividing the serum C-reactive protein (CRP) by the serum albumin, a parameter that reaches it's highest value on day 2 to 3, the classical turning point [2].

The 2nd iFAD was attended by 500 participants (330 doctors, of whom 27 faculty, 120 nurses and 50 representatives from the industry). Because of this success the 3rd iFAD is planned as a 2 day symposium on November 29th—30th, 2013 at the Hilton Hotel in Antwerp. Mark the date, submit an abstract (www.fluids.eu/abstract) and check the website regularly for updates on the preliminary program.

While there is an exponential increase in open access and scholarly journals over the last years, the main focus goes to dedicated specialty journals on a specific topic with a high impact factor. The result is that good quality journals are receiving an increasing number of submissions, resulting in slow processing times for

review and publication and a "gamble" in which perfectly sound papers can eventually be rejected [6, 14]. The goal of Fluids is to serve as a platform to promote research on fluids and fluid management in critically ill patients. The journal accepts state-of-the-art papers, reviews, case reports, original research papers, as well as technical notes and meeting reports in relation to fluid resuscitation, organ monitoring and organ support or any other topic related to critical care. The peer review process will be done via a fully internet based editorial office and papers are published on-line as open access. Printed issues will be published for meetings supported or organized by iFA. The journal is expected to be PubMed listed in the near future.

Let me give you 10 simple but good reasons why you should consider submitting your next original articles, critical care reviews, editorials, research notes and short communications to Fluids :: The Journal on Medical Fluid Management [6]. As stated elsewhere, I must admit that I always ask the question "give me 10 good reasons why I should use your drug" to a new sales representative visiting me with yet another super-drug, and you will be amazed that many hit the road, ill-prepared, stuttering after they explained and documented the second advantage of the new drug compared to your standard of care [6]. First, as explained above, in the crowded market of dedicated journals there is a place for a journal with a very broad scope. Second, Fluids is a peer-reviewed journal, all manuscripts are evaluated by independent anonymous referees in the usual way, but the editors will ensure that this is done as speedily as possible. Third, it is an open access journal managed by a professional Warsaw based publishing company Blackhorse Science and Business Media in association with the publisher Trzaska Evert Michalski LLC, founded in 1920, based recently in the United States of America, as such it is free for readers and readily available on the internet for download, accounting for a high availability and high visibility. This increases the number of people who read and cite the work [14]. This is important since the majority of doctors in the world do not have access to full text papers (either in high or low quality journals). Moreover, and fourth, it is also free for authors submitting their work (a small article processing fee or charge may apply related to editing and typesetting in the future). Fifth, Fluids also offers the possibility to provide help for non-native English speaking authors for those articles that need major English editing and formatting by BioScience writers (www.biosciencewriters.com). BioScience Writers will help maximize the accuracy and impact of your written documents to enhance your scientific publication. Their premier scientific editing and proofreading services benefit both native and non-native English speakers. Sixth, there is no restriction on the word length of the papers as we encourage researchers to publish their experimental and theoretical results in as much detail as possible. Seventh, Fluids is a member of the Committee on Publication Ethics (COPE). Peer review in all its forms plays an important role in ensuring the integrity of the scholarly publications. The process depends to a large extent on trust, and requires that everyone involved behaves responsibly and ethically. Peer reviewers play a central and critical part in the peer-review process, but too often come to the role without any guidance and unaware of their ethical obligations. COPE has produced some new draft guidelines which set out the basic principles and standards to which all peer reviewers should adhere during the peer-review process in research publication (www. publicationethics.org/resources/guidelines). Eight, Fluids ensures rapid publication and accepted papers are immediately published online. Once a manuscript is accepted, it can be prepared for on--line publication much faster than for a print journal. Furthermore, there is no need to wait until an "issue" is complete, so each article will be published as soon as it is ready. The result is that work gets published faster and cited sooner [14]. Ninth, the advisory and editorial board and team of Fluids is a multicultural, multilingual, international mixture of physicians all being experts in their field. Finally, Fluids supports the set up of special issues focusing on hot topics related to a special and specific research field. Although these special issues will often be edited by a member of the Editorial Board or Team, we welcome proposals from the whole critical care community. For example, as is the case with this Special Issue, that is devoted to selected papers presented at the 10th ACCS meeting, we also welcome the proceedings of scientific meetings within the broad scope of critical care. If you are not yet convinced, in the near future an application will be available form the App-store to search and read all open access papers on your iPAD or other tablet PC.

The path ahead is clear but only time will tell whether Fluids will follow this path and become a successful peer-reviewed, open access journal amongst his peers. The success will mainly depend on the fact whether Fluids will be PubMed indexed in the future, and therein lies the real challenge. With your help and support this is just a small step ahead… so why not submit your next paper to Fluids, and remember it is completely free of charge… In the meantime enjoy the interesting and sometimes maybe controversial lectures of an outstanding faculty of key-opinion world leaders at the 10th ACCS meeting in Manchester. Congratulations to our friendly and charming host and chairman Dr Veerappan Chithambaran!

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