Implementation of the ABCDEF Bundle in Cardiovascular Intensive Care

[演者] 細川 雄亮:1
[共同演者] 山本 剛:1, 浅野 和宏:1, 木村 徳宏:1, 門岡 浩介:1, 三軒 豪仁:1, 中田 淳:1, 太良 修平:1, 清水 渉:2
1:日本医科大学, 2:日本医科大学 循環器内科

Delirium is very common in cardiovascular intensive care unit (ICU). However, it remains poorly understood and under-recognized by cardiologists. The occurrence of delirium during hospitalization is associated with increased in-hospital and long-term morbidity and mortality. Recently ICU-AW (acquired weakness) is also likewise predictive of poor outcomes. Delirium and weakness are influenced by illness and aggravated by treatment modalities in the ICU. Those interact with each other in a negative spiral. The ABCDEF bundle is an evidence-based guide for clinicians to approach the organizational changes needed for optimizing ICU patient recovery and outcomes. Higher the bundle compliance is independently associated with improved survival and more days free of delirium. The ABCDEF bundle composed of A: Awakening, B: Breathing, C: Coordination and Choice of sedatives or analgesics, D: Delirium monitoring and management, E: Early exercise and mobility and F: Family engagement and empowerment, is suggested to break the negative spiral. Recently, cardiovascular ICU cares for more critically ill patients such as advanced heart failure and post cardiac arrest syndrome. So the ABCDEF bundle approach was started in our cardiovascular ICU. Of the 1388 patients studied between August 2014 and June 2018, 426 (30.7%) were administrated some kind of sedatives according to RASS scale, and 118 (8.5%) required mechanical ventilation. Pain was treated with fentanyl being the primary analgesic used. We provided early cardiac rehabilitation and family engagement. As the landscape of the cardiovascular ICU continues to evolve and the patient population...
becomes increasingly more complex, sick, and aged, the ABCDEF bundle approach would be useful moreover.

[Keywords] emergency care / patient care