

# Do We Need to Lose more Lives Unnecessarily? It is Time to Call for more Intensivists in Thailand

Wanna Somboonviboon MD\*<sup>1</sup>

\*<sup>1</sup> Department of Anesthesiology, King Chulalongkorn Memorial Hospital, Bangkok, Thailand

---

*J Med Assoc Thai 2014; 97 (Suppl. 1): S119-S120*

*Full text. e-Journal: <http://www.jmatonline.com>*

---

Management of ICU patients requires qualified personnel as well as modern medical equipment. Qualified personnel includes physicians, nurses and other personnel who have been highly trained and kept abreast with new technology and life support equipment. It is rather obvious that equipment is more necessary for ICU patients than for general patients. In order to secure these two basic but essential factors, public policy and financial resources are inevitable to accomplish the successful intensive care medicine.

All hospitals which have ICU should be staffed with qualified intensivists. These specialists are the key staff for successful intensive care management. They must have full support from public sector to provide them with equitable income and training on regular basis to strengthen their skill and to familiarize them with state of the art in critical care practice.

In general, cost of intensive care medicine is around 20-30% of hospital budgets<sup>(1)</sup>. It may be also higher than other categories of hospital budget. Therefore, the success of ICU patients' recovery should justify the available budget. The cost of staffing intensivists alone is not sufficient to render success of ICU patients' speedy recovery. The other indispensable cost is for modern equipment to support ICU patients' daily care.

In addition to the cost of intensivists and equipment, continued professional training should be provided to ICU personnel on a regular basis. This is to ensure that personnel are kept abreast with up-to-date knowledge, practices and technology. Professional society can also play an important role to support this training task. In Thailand, Society of Critical

Care Medicine was established in 1991 and dedicated to provide training to ICU personnel. It started its regular training program in 2000 aiming at providing qualified personnel to hospitals across the country.

Several reports strongly support the idea of staffing intensivists to administer the "Closed ICU". The "Closed ICU" is a system that has sufficient number of intensivists, specialized nurses, pharmacists and respiratory therapists to care and to monitor patients at all times. Result of patients' evaluation and effective rehabilitation as well as timely assessment of patients' conditions are essential factors for patients' speedy recovery and increasing rate of survival, reducing time of using ventilators and reducing cost of patients care<sup>(2)</sup>.

However, at present, Thailand is apparently lacking in intensivists. The sufficient number of intensivists depends on the public policy of concerned government agencies. The concerned agencies must come up with ways and means to increase the sufficient number of intensivists to cope with ever increasing cases of ICU patients as well as for the sake of patients' survival and free from emerging adverse affects.

Global trends as well as for Thailand, the number of ICU patients is increasing not only for senior patients who have several diseases due to old age. More than 50% of these patients require the services of ICU<sup>(3)</sup>. In addition, several young patients need the service of ICU as well. This includes young patients who suffer from sepsis or ARDS which has underlying malignancies. Young patients who have compromised immune or trauma as well as those who suffer from natural calamity absolutely require ICU service as well. Increasing the number of beds in ICU as well as expansion of ICU is inevitable in order to meet ICU patients' requirements. Consequently, qualified ICU personnel must be increased to correspond to the number of patients, to ensure sufficient patient care, better rate of survival and free from adverse affects

---

**Correspondence to:**

Somboonviboon KW, Department of Anesthesiology, King Chulalongkorn Memorial Hospital, Bangkok 10330, Thailand.  
Phone: 0-2256-4000  
E-mail: [wannafmed@yahoo.com](mailto:wannafmed@yahoo.com)

derived from unfavorable side effects.

Consequently, increasing number of intensivists is one of key objectives of the Thai Society of Critical Care Medicine to promote and ensure the well being of ICU patients. The intensivists will lead effective critical care medicine and oversee that the investment on expensive equipment, drugs and training programs are worthwhile and justified. Professional training on critical care medicine is an important approach to achieve the objective as desired.

However, policy and public dedication from echelons higher than the Thai Society of Critical Care Medicine is necessary. Public policy set forth by management of concerned government agencies is an indispensable factor. For instance, the policy of Ministry of Public Health on supporting training programs and allocation of intensivist positions in hospitals across the country based on priority should be in place. Furthermore, the Ministry should see that comfortable working atmosphere, opportunity for attending training programs and technical conferences, and last but not least, equitable remuneration, are provided to intensivists and other qualified ICU personnel. In addition, modern life-saving equipment shall be sufficiently equipped in ICU of all hospitals. The medical equipment includes ventilators, hemodynamic monitoring, x-ray machine, ultrasound and dialysis machines and others as needed. The availability of modern equipment will boost the moral and confidence of intensivists and ICU staff. When the ICU staffs have been equipped with reliable and efficient machines and equipment plus equitable

income, the personnel turnover will be at low rate. Sustain ability of qualified staff can be accomplished. This in turn will ensure the utmost benefits to ICU patients whose speedy recovery is the main objective of critical care medicine.

In conclusion, Intensivists are key staff for effective and efficient intensive care medicine. The combination of favorable public policy, resources and cooperation of professional society are essentials for the successful intensive care medicine. The essentials will ensure the sufficient number of dignified intensivists who will provide better services to ICU patients with the help of modern equipment. All of these factors will ultimately contribute to the utmost benefit and well being of ICU patients.

#### References

1. Multz AS, Chalfin DB, Samson IM, Dantzker DR, Fein AM, Steinberg HN, et al. A "closed" medical intensive care unit (MICU) improves resource utilization when compared with an "open" MICU. *Am J Respir Crit Care Med* 1998; 157: 1468-73.
2. Pronovost PJ, Angus DC, Dorman T, Robinson KA, Dremsizov TT, Young TL. Physician staffing patterns and clinical outcomes in critically ill patients: a systematic review. *JAMA* 2002; 288: 2151-62.
3. Angus DC, Shorr AF, White A, Dremsizov TT, Schmitz RJ, Kelley MA. Critical care delivery in the United States: distribution of services and compliance with Leapfrog recommendations. *Crit Care Med* 2006; 34: 1016-24.