

"Back in the saddle": early training in critical care

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“BACK IN THE SADDLE” EARLY TRAINING IN CRITICAL CARE

Effects of early training and evaluation of physical function and activity in mechanically ventilated, critically ill adults

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April 2022

1. Early exercise training combined with mobilisation is not preferable to established usual care rehabilitation regarding functional outcomes of mechanically ventilated, critically ill adults at hospital discharge. *(This thesis)*
2. Active patient participation, shorter session durations and mobilisation are important modifiable drivers for physiological changes during early rehabilitation of mechanically ventilated critically ill adults. *(This thesis)*
3. German-speaking physiotherapists should assess critically ill patients' physical function and activity during routine care from ICU baseline to ICU and hospital discharge with the translated, cross-culturally adapted German CPAx. *(This thesis)*
4. Using the CPAx score at ICU discharge has clinical value in prediction of 90-day residence and hospital discharge destination. *(This thesis)*
5. Muscle weakness at ICU discharge should be avoided because it is associated with worse functional capacity and independence at hospital discharge. *(This thesis)*
6. “The physician must always consider complete bed rest as a highly unphysiologic and definitively hazardous form of therapy, to be ordered only for specific indications and discontinued as early as possible.” Dock W. 1944. The evil sequelae of complete bedrest. JAMA. *(Research area)*
7. “The head bone is connected to the body bone”. Prof. Dr Dale Needham *(Research area)*
8. „Primum non nocere” – “First do no harm”. Hippocratic Oath *(Research area)*
9. “Ever tried. Ever failed. No matter. Try again. Fail again. Fail better.” Samuel Beckett *(Other)*
10. A clinical academic gets the best of two worlds. *(Other)*