

Baltic Diving and Hyperbaric Medicine Symposium 2018

The Baltic International Symposium on Diving and Hyperbaric Medicine was held this year at the end of May in Gdynia, a seaport on the Baltic Sea and home to Poland's National Centre for Hyperbaric Medicine. The small Hotel Nadmorski, where the meeting was held and most of the delegates were staying, is situated on the Bay of Gdansk.

The meeting, held in English, which for most attendees was a second language, covered a wide variety of topics in diving and hyperbaric medicine over three days. On the first day, two workshops were held; in the morning on bubble detection in divers and in the afternoon on intensive care in the hyperbaric unit. There were four hours of lectures in each session; eight speakers in the morning and six speakers in the hyperbaric medicine session. Both workshops were excellent.

There is still so much that is still unknown but assumed in the science of bubble detection in relation to the incidence of decompression illness (DCI). The workshop provided an overview of the concept of 'decompression stress' and how difficult it is to study, the use of both Doppler bubble detection and echocardiography, the role of right-to-left shunts in DCI and a good review of the 'life of a bubble'. It was a pity there were not more young scientists and physicians there to benefit from these excellent talks. Bubble detection is a small area that has numerous applications in diving science but has not been utilised to its full potential and it has been difficult for many to implement.

The session on intensive care under pressure was comprehensive and informative with regard to the varying ability of different units to care for ventilated, intubated patients inside a hyperbaric chamber. There are many units around the world that have limited experience and are often reticent to accept critically ill patients for hyperbaric treatment. Likewise, intensive care (ICU) specialists and surgeons are equally reticent to refer such patients for HBOT. Cardiovascular and respiratory problems that may be encountered in the intensive care patient in the chamber were well covered. Devices for patient monitoring and treatment that are safe and able to function under pressure were reviewed by the symposium's convener, Associate Professor Jacek Kot. It was interesting to learn that some European chambers are able to use the Corplus 3 defibrillator in their multiplace chamber. The 'elephant in the room' for many units is the cost of providing 24/7 cover for these emergency ICU patients.

The first day of the main Symposium covered diving medicine where many of the previous day's diving physicians and scientists spoke to a receptive audience on a wide range of topics. Of particular interest was a presentation on recreational diving fatalities in Finland, often technical divers on closed circuit rebreathers (CCR) found days later. Deep CCR diving deaths continue to generate considerable

discussion including the cave diving fatality in South Africa from several years ago, and it was interesting to see again the video of this fatality.

The final day was on hyperbaric medicine. Amongst the various topics presented, there was a strong focus on hyperbaric oxygen (HBO) for severe sepsis, the view being expressed that more of these patients should be receiving HBO but this seems to not be getting through to intensive care doctors, otherwise we would be treating many more. The audience was reminded that the European Committee for Hyperbaric Medicine at its 2016 consensus conference promulgated a list of 'accepted' conditions for HBOT, including their rationale and level of evidence. These recommendations are to be found on the EUBS website and published in *Diving and Hyperbaric Medicine*.¹ Amongst conditions currently under study, the potential role of HBO for inflammatory bowel disease is the subject of a prospective, non-randomised European multicentre trial.

The National Centre for Hyperbaric Medicine is a large facility with clinical and interconnecting research chambers also used by the Polish Navy. Located outside the building are a number of old chambers that give an 'authentic' edge to this medical building in the middle of Gdynia. During the meeting, the local university rector, Professor Michal Gruchala, thanked Dr Zdzislaw Sicko, the former Head of the Hyperbaric Centre for his long-lasting work, whilst Dr Jaroslaw Pinkas, the former Polish Secretary of State for Health, received the traditional hard-hat diver's knife and a plaque for his support – an honour rarely deserved by a politician!

The Gdynia National Centre for Hyperbaric Medicine held an excellent symposium in a lovely location. Gdynia was easy to get to and an enjoyable place to visit. There are no excuses for not attending another unless you are concerned about your liver. You will need to be diligent though, as there were over 18 hours of talks if you planned to attend both the workshops and the main meeting. The informal exchanges during the social gatherings undoubtedly enhanced the overall experience for this 'rapporteur'.

Reference

- 1 Mathieu D, Marroni A, Kot J. Tenth European Consensus Conference on Hyperbaric Medicine: recommendations for accepted and non-accepted clinical indications and practice of hyperbaric oxygen treatment. *Diving Hyperb Med.* 2017;47:24–32. PMID: 28357821. Kot J. Correction. *Diving Hyperb Med.* 2017;47:131–2. PMID: 28641327.

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