

## Respiratory Care Controversies II

The practice of respiratory care ideally should be based upon a sound evidence base rooted in well designed clinical trials. Unfortunately, however, the evidence base supporting respiratory diagnosis and management strategies is often quite thin, and as a consequence, clinical decisions are frequently based on suboptimal supportive data or just simply opinions. This creates a practice environment that often swirls with controversy on what defines best practice. To address this, the American Respiratory Care Foundation in 2007 convened its first RESPIRATORY CARE Journal Conference that focused entirely on “hot” controversies.<sup>1</sup> The conference format was unique in that it involved exclusively pro-con debates on 14 different topics. This allowed the framing of controversial clinical questions in a different way: by exploring the extremes of an issue and then working toward common ground. By all accounts, this format succeeded beautifully and the resulting articles have been widely cited.

Because of the success of this first controversies format, the American Respiratory Care Foundation and the Jour-

nal convened a second controversies conference in Cancún Mexico in March 2009. Twelve new “hot” topics were selected and, again, speakers presented in a pro-con format, with considerable, often spirited, discussions following each. The proceedings of this conference constitute this and the following issue of the Journal, and it is hoped that these will again provoke thought and speculation, stimulate discussion, and encourage further scientific investigation. Our respiratory care patients deserve no less.

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### REFERENCE

1. Cheifetz IM, MacIntyre NR. Respiratory controversies in the critical care setting. Conference summary. *Respir Care* 2007;52(5):636-644.

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Dr MacIntyre has disclosed a relationship with CareFusion. Mr Branson has disclosed relationships with Ikaria, Bayer, Newport, CareFusion, and Covidien.