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EDITORIAL

From Evidence to Clinic, from Local to Global: A Journey of Continuous Development

Dear Readers,

The dynamic nature of pediatric emergency and intensive care medicine keeps us on a continuous journey of learning and adaptation. Every new day brings a new clinical question, an unexpected diagnosis, or a study that reshapes our evidence-based practice. This dynamism is one of the most challenging, yet also most rewarding, aspects of our profession. In this issue of the Journal of Pediatric Emergency and Intensive Care Medicine, we are delighted to present a wide range of valuable studies that reflect the different stages of this ongoing journey, spanning from local to global contexts.

The last few months have witnessed significant developments in our field. Foremost among these is undoubtedly the publication of the American Heart Association's (AHA) 2025 Guidelines for Cardiopulmonary Resuscitation and Emergency Cardiovascular Care.¹ As the product of a five-year cycle, these guidelines form the cornerstones of our resuscitation practice. Given the importance and scope of the topic, in addition to our traditional editorial in this issue, we are also presenting a special editorial titled "The 2025 AHA Guidelines for Pediatric Resuscitation: From Technical Updates to Holistic Care." In that piece, we have analyzed in detail the key changes compared to the 2020 guidelines and the underlying paradigm shifts. We believe this approach will allow for the in-depth examination the subject deserves and will serve as a valuable reference for clinicians.

The content of this issue once again showcases the breadth and depth of our field. Our issue begins with a comprehensive review from Indonesia that addresses the problems of critically ill children, offering us a global health perspective. Following this, the valuable study by Yousef et al. from Saudi Arabia and Egypt, which examines survival in pediatric in-hospital cardiac arrests, reinforces the timeliness and importance of the subject, especially in this period when new resuscitation guidelines have just been released.

A single-center retrospective cohort study by Güngör et al. from Ankara, comparing the clinical outcomes of coronavirus disease-2019 and influenza, provides data of high practical value for clinicians during the current respiratory virus season. Meanwhile, the study by Adak et al. from Mersin once again brings to the forefront the role of inferior vena cava diameter measurement in assessing the fluid status of children in intensive care units.

Large-scale, long-term studies from our country are also a highlight of this issue. The 11-year national emergency department cohort study by Vatansever et al. which develops a risk model for hospitalization and mortality in children with cyanotic congenital heart disease, is an excellent example of how valuable local data can be and how it can shed light on our clinical decision-making processes. Similarly, the prospective study by Tepedelen Bozdağ et al. from Aydın offers an evidence-based perspective on a common surgical emergency by identifying predictive factors for acute and complicated appendicitis in children.

Toxicology and rare conditions, an integral part of our clinical practice, are also represented in this issue through case reports. Cases of sibutramine-induced serotonin syndrome and baclofen poisoning from Malaysia offer important lessons on managing unexpected toxicities, while a case of high-dose cytarabine-related toxic encephalopathy from Kahramanmaraş raises our awareness of the complex side effects of oncological treatments.

Finally, the study by Tekbiyık et al. from Istanbul, which examines the clinical profile of children and adolescents referred for psychiatric admission after an emergency psychiatric evaluation, reminds us once again of the fact that physical and mental health are a whole and of the critical role our emergency departments play at this intersection.

Each article in this issue contributes to our common goal of integrating evidence-based medicine principles into clinical practice, learning from experiences in different geographies, and ultimately, providing better care to the children we serve. We wish you all an enjoyable and enlightening reading.

Sincerely,

Prof. Dr. Hayri Levent Yılmaz

Editor-in-Chief

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Reference

1. Del Rios M, Bartos JA, Panchal AR, Atkins DL, Cabañas JG, et al. Part 1: executive summary: 2025 American Heart Association Guidelines for cardiopulmonary resuscitation and emergency cardiovascular care. *Circulation*. 2025;152:s284-312.