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∂ Relevant Factors for Physical, Mental, and Cognitive Problems in ICU Survivors

To the Editor:

We were impressed by the article by Geense and colleagues, which clarified the baseline characteristics of patients admitted to the ICU (1). Their work will contribute to further epidemiological studies on post–intensive care syndrome (PICS). However, we would like to point out three concerns regarding this study.

First, there is insufficient information regarding ICU rehabilitation, although the authors emphasized the importance of rehabilitation for clinical practice in the discussion. Early mobilization may improve functional outcomes in patients admitted to the ICU (2). The long-term effects of early mobilization are unclear based on a previous systematic review (3). Did the prevalence of PICS differ between patients in the ICU who were provided early mobilization and those who were not? This information will help readers to acknowledge the importance of rehabilitation in the ICU.

Second, there is insufficient information about the disposition of participants, which may affect patient-reported outcomes (4). We would like to suggest including the following information to assess the significance of this study: 1) were the patients transferred or discharged? And 2) where did the participants live a year later (back in their original living place, or returning to work or not)?

Third, the authors did not report the number of cases imputed for missing values or conduct a complete case analysis. Imputation underestimates the SD, resulting in inappropriate confidence intervals (5). However, a complete case analysis assesses the significance of imputation by comparing each regression model. Addressing the aforementioned concerns can help readers interpret the results and further understand the importance of newly recognized physical, mental, and cognitive dysfunction in PICS.

Author disclosures are available with the text of this letter at www.atsjournals.org.

Tomoharu Suzuki, M.D.* Urasoe General Hospital Urasoe, Japan

Hiroshi Ueta, M.D. Kobe City Medical Center General Hospital Kobe, Japan

Shunsuke Taito, P.T., Ph.D. Hiroshima University Hospital Hiroshima, Japan

ORCID ID: 0000-0002-5557-0516 (T.S.).

*Corresponding author (e-mail: 19153suzuki@jin-aikai.xsrv.jp).

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Reply to Suzuki et al.

From the Authors:

We thank Suzuki and colleagues for their interest in our manuscript describing new long-term physical, mental, and cognitive health problems in ICU survivors 1 year after ICU admission, which was recently published in the *Journal* (1). In their letter, they pointed out three concerns regarding our study.

First, Suzuki and colleagues stated that there was insufficient information regarding ICU rehabilitation and questioned whether the prevalence of post-intensive care syndrome (PICS) would

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