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Neuroprotection and cardioprotection after cardiac arrest: how cool is cool enough? Response to Polderman

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Dear Editor,
We thank Dr. Polderman for his interest and comments on our suggested strategies to increase survival from cardiac arrest [1, 2]. We indicated that there remains debate about whether 33 or 36 °C is the optimal target during temperature control after cardiac arrest. Until recently, the 33 °C target was the most commonly used

in clinical practice, probably because this was in the middle of the target range (32–34 °C) for the interventional arm of the Hypothermia After Cardiac Arrest (HACA) trial [3], but the TTM trial recently challenged this target [4]. We agree that on the basis of all the available data, when treating comatose post cardiac arrest patients with temperature control, a constant target temperature in the range 32–36 °C should be recommended. This is also consistent with the recent draft treatment recommendation made by the Advanced Life Support Task Force of the International Liaison Committee on Resuscitation (ILCOR) [5]. We await the results of ongoing studies that will provide more data on timing, duration and depth of targeted temperature management.

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