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Covid-19: Intensive care units asked to take extra patients as hospitals struggle to find beds

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Pressure for general hospital beds is delaying the discharge of patients from intensive care units (ICUs), say consultants in intensive care. Some ICUs are even being asked to take patients who do not need high dependency support.

Last winter (2020-21) the demand for beds in ICU was so great that it was not uncommon for patients to have to be transferred to other hospitals, some hundreds of miles away, at the peak of the pandemic. ICU beds had to be reserved for covid-19 patients requiring invasive ventilation while areas were set up on other wards to deliver non-invasive ventilation (CPAP).

This winter (2021-22) fewer covid-19 patients require admission to ICU.

Alison Pittard, dean of the Faculty of Intensive Care Medicine, said, “The success of the vaccination programme is likely to be responsible for patients being less sick when infected by covid-19 and therefore less likely to require ICU. The pressure on beds is having more of an impact on the ward than ICU.”

As a result, many ICUs are now taking patients that require CPAP and some have patients taking up beds who do not require any additional level of support.

Peter Hampshire, clinical director of critical care at Liverpool University Hospitals NHS Foundation Trust, told *The BMJ*, “When our patients are ready to go to a ward, there is often not enough space to step them out of ICU. We have used high dependency beds for ward level patients because there are no ward beds.”

David Hepburn, consultant in intensive care medicine and anaesthesia at Llanfrehfa Grange hospital, Cwmbran in Wales, said that the hospital had closed its respiratory high care area that had provided CPAP last year to free up those beds. “Anyone needing more oxygen support than can be provided on a ward now needs to come to ICU,” he said. “We have around 10 patients ready for ward discharge after emergency operations, but because of a lack of flow in the system we can’t get them beds in the rest of the hospital.”

Mervyn Singer, professor of intensive care medicine at University College London, said delaying discharge from ICU or admitting patients not requiring a high level of support because of pressure elsewhere in the hospital was “an ongoing problem that predates covid-19.” He added, “Delayed discharges are much more of a problem. Emergency department patients needing a bed get prioritised for a general ward bed meaning we can’t discharge ICU patients who don’t need to be with us any longer. We’re often in the situation that we only get a discharge when there’s an ICU admission that needs to come in.”

The number of beds in hospital ICUs in England varies between four and 50, with most having between six and 20.¹

¹ Anandaciva S. Critical care services in the English NHS. November 2020. www.kingsfund.org.uk/publications/critical-care-services-nhs.

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