

CURRICULUM VITAE

Filippo Sanfilippo
MD, Ph.D., EDIC, TEE-ESC

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PERSONAL DETAILS

Name and Surname:	Filippo Sanfilippo	Date of Birth:	21.06.1981
Nationality:	Italian	Gender:	Male
Home Address:	Via Caronda n 446, 95128 - Catania, Italy		
Email:	filipposanfi@yahoo.it	Mobile	+39 3289178766

QUALIFICATIONS AND ACCREDITATIONS

- 1. Licence as Associate Professor in Anaesthesia and Intensive Care** issued from the Italian Ministry of Education and Research (MIUR). 27 March 2018 and valid for six years.
- 2. Accreditation for Trans-Oesophageal Echocardiography** - European Society of Cardiology (ESC) and European Association of Cardiovascular Imaging (EACVI). Valid from March 2014 to February 2019.
- 3. European Diploma of Intensive Care (EDIC)** – ESICM (Reading, UK), 28.06.2013.
- 4. Basic Life Support and Defibrillation (BLS) provider** – American Heart Association (Palermo, IT), 18.05.2017.
- 5. Advanced Life Support (ALS) provider** – UK Resuscitation Council (Oxford, UK), 14.05.2013. – American Heart Association (Palermo, IT), 20/21.07.2017.
- 6. Paediatric Advanced Life Support (PALS) provider** – American Heart Association (Palermo, IT), 01/02.02.2017.
- 7. PhD in “Experimental and Clinical Pharmacology”** – University of Catania (Italy), 18.03.2013.
- 8. Certificate of ECMO course training** – Papworth Hospital NHS Foundation Trust, UK 24.09.2012 to 26.09.2012.
- 9. Advanced Trauma Life Support (ATLS) Provider** - Royal College of Surgeons (Cambridge, UK), 02.11.2011 to 04.11.2011.
- 10. Registration at the General Medical Council** since 23.02.2010, GMC number: 7064842
- 11. Certificate of Completion of Specialty Training in Anaesthetics and Intensive Care** – University of Catania (Italy) with Honours, on 04.11.2009.
- 12. Licence to practice** – University of Catania, session II/2005. Listed in the Medical Register of the Medical Council of Catania since 21.03.2006, number 13251.
- 13. Primary Medical Qualification** – University of Catania (Italy) with Honours, 28.07.2005.

CLINICAL

01st March 2018 to date

Policlinico-Vittorio Emanuele University Hospital, “G. Rodolico” site, Catania

I am working in this University Hospital where I am mainly involved in the ICU activities, although I still work sometimes in the OR. This is a general ICU with 8 beds and a plan for expansion in the near future. In this Hospital, I am involved in the teaching of trainees and in developing research.

01st March 2016 to 28th February 2018

ISMETT (Mediterranean Institute for Transplant & High Specialization Therapies), Palermo

Consultant in ICU and Anaesthesia

I started as Attending/Consultant working in Cardiac and Thoracic OR as well as in the ICU. In OR we perform both elective high-risk cases, urgent/emergency cases and heart or lung transplants. The 14-bed ICU admits high-risk patients after thoracic, cardiac, abdominal surgery as well as candidates for transplants. I developed more research in the Department and published several papers. I was in charge of the training of fellows coming from University of Pittsburgh (US) for their rotation, as well as working with trainees/residents coming to ISMETT for a period during their specialization. I was awarded by the University of Pittsburgh with the prize for “the excellence in clinical teaching of residents”, being the first non-US Consultant winning such prize.

01st January 2015 to 28th February 2016

Morgagni Heart Centre, Pedara (Catania)

Consultant in Cardiovascular ICU and Cardiovascular Anaesthesia

This was my first Consultant appointment in Italy after almost 5 years spent in the UK. In this centre I worked as Consultant in an 8-bedded Cardiovascular ICU, and the workload was prevalently represented by cardiac surgical patients. The ICU admit also acute coronary syndromes necessitating PCI and some patients after major vascular surgery. The Centre has recently increased its workload running at an average of 70 cardiac surgery cases/month. I am trying to bring some innovation according to EBM, to introduce some protocols for better patients’ care and to suggest approaches to decrease costs. However, the pre-appointment agreements and discussions with the ICU and Anaesthesia Directors on the opportunity to improve pathways of care and to bring some innovation have not been respected at all, that is why I moved to ISMETT in Palermo.

12th May 2014 to 31st December 2014

St Georges Hospital NHS Trust, London

Consultant in Cardio-thoracic ICU and Cardio-thoracic Anaesthesia

This was my first UK Consultant appointment in an 18-bedded Cardio-thoracic ICU (workload split roughly 70:30 between elective cardiac, thoracic and vascular surgical patients, and emergency cardiology). The split is approximately 50:50 in terms of bed occupancy (approximately 1.600 patients/year are admitted to CTICU). There is also a fast-track system for the cardiac surgery patients so the Unit receives the more challenging cases. The OOH-CA survivors are all admitted to CTICU (one of the largest contributors to landmark TTM trial). I actively provided teaching, lead audits and research. From the feedback I received, junior doctors are very happy of my teaching ward-round and of the “unscheduled” teaching sessions I gave whenever the Unit was not too busy. I developed a monthly journal club with three article discussed each time. I was also the lead for a new extubation protocol after cardiac surgery, giving teaching sessions to junior doctor and nursing staff. I actively contributed to nurse teaching as well and I taught St George’s University of London medical students both on the Unit and with frontal teaching on “Process of Anaesthesia and Perioperative medicine”. I was in charge of the development of the new system for electronic prescription, with particular interest in the safety aspects. I did really enjoy working with very knowledgeable Consultant Colleagues at CTICU and they were happy of my clinical/scientific work as well as of my integration with the staff. I had an informal appraisal with my Colleagues and they strongly supported my application for a substantive Consultant job. I was very happy but then I had a job offer in Catania, both for myself and for my fiancée. We decided to take this opportunity.

1st February 2014 to 11th May 2014.

Royal Brompton and Harefield Hospital, NHS Foundation Trust – Harefield site

Senior Clinical Fellow in Cardiac Critical Care, Heart-Lung Transplant -VADs

This prestigious centre had the highest number of heart and lungs UK transplants in 2013 (over 250 cases). In this 25-bedded Unit I gained expertise also in the management of patients with terminal cardiac/lung diseases managed with extracorporeal support (ECMO, LVAD, RVAD, BiVAD, Novalung). In this busy unit we had on average 5 patients on extracorporeal support and we admitted very sick cardiac surgical patients since the most difficult cases that are turn down for surgery from other Centres are sent to Harefield Hospital for further evaluation.

1st February 2013 – 31st January 2014 (12 months)

Oxford Heart Centre, John Radcliffe Hospital, Oxford University Hospitals NHS Trust.

Senior Clinical Fellow in Cardiac Anaesthesia and Critical Care.

I was working in the CTCCU, in Cardiac Theatre and in Cath-lab, with an increasing level of clinical responsibilities since previous appointment, including supervising senior trainees in their

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Intermediate and Higher modules. The CTCCU is a 21 beds unit with 14 beds dedicated to cardiac surgery. I gained excellent competences in TEE, and in particular I became skilful in 3-D/4-D TOE. I completed the full TEE accreditation and acquired competences also in TTE. I was independently leading Cardiac lists and I also led Cath-lab lists on my own. I was in charge of the fellow's teaching providing lectures on echocardiography as well regularly organizing journal clubs.

1st February 2012 – 31st January 2013 (12 months)

**Nuffield Dept. Anaesthetics, John Radcliffe Hospital, Oxford University Hospitals NHS Trust.
Clinical Fellow in Cardio-Thoracic Anaesthesia and Critical Care.**

During this period I gained skills and competences in leading a Cardiac and Thoracic list. Consultants were happy for minimal supervision during the last six months. On-call duties were spent in the CTCCU. I achieved independence in performing TEE, in both ventilated and awake patients. I passed the written exam for the full TEE Accreditation. I completed a 3 months block of Difficult Airways training consolidating skills in fibre-optic intubation.

1st November 2011 – 31st January 2012 (3 months)

**Addenbrooke's Hospital – Cambridge University Hospitals NHS Foundation Trust.
Senior Clinical Fellow in the John Farman Intensive Care Unit (JVF-ICU)**

The Adult General JVF-ICU has 20 critical care beds. As well as being a General ICU, it is also a Liver Unit and I also gained competence in liver disease and in transplants (liver, kidney, pancreas, bowel, multi-visceral).

23rd October 2010 - 31st October 2011 (12 months)

**Addenbrooke's Hospital – Cambridge University Hospitals NHS Foundation Trust.
Clinical Fellow in Neuroscience and Trauma Critical Care Unit (NCCU).**

I gained competence in the management of patients with neurological and neurosurgical diseases, and polytrauma patients. The NCCU is a 19-bed Unit (rate of occupancy ~100%): a primary diagnosis of trauma or neurological and neurosurgical disease is present for ~75% of admission. The remaining patients present the broad spectrum of critical illness of an Adult General ICU.

18th March 2010 – 22nd October 2010 (7 months)

**Northern General Hospital - Sheffield Teaching Hospitals, NHS Foundation Trust.
Critical Care Registrar.**

I worked in both the 12-bed HDU and in the 14-bed Adult General ICU. I also had a theatre secondment for General and Cardiac Surgery.

Postgraduate Medical Training

October 2005 – November 2009

School of Anaesthesia and Intensive Care - University of Catania, Italy.

I attended various Hospitals of Catania Deanery and for a period of 15 months I worked in Pordenone

- **Gen. Surg. & Pre-Anesthetic (12 months)** – “Policlinico-Vittorio Emanuele” Hospital, Catania
- **Neurosurgery (4 months)** – “Policlinico-Vittorio Emanuele” Hospital, Catania
- **Orthopaedics & Urologic Surgery (4 months)** – “Garibaldi Nesima” Hospital, Catania
- **Vascular Surgery (10 months)** – “Garibaldi Nesima” Hospital, Catania
- **Paediatric Surgery (3 months)** – “Policlinico-Vittorio Emanuele” Hospital, Catania
- **Obstetrics and Gynaecology (3 months)** – “Santa Maria degli Angeli” Hospital, Pordenone
- **Thoracic Surgery (3 months)** – “Santa Maria degli Angeli” Hospital, Pordenone
- **Intensive Care Unit (9 months)** – “Santa Maria degli Angeli” Hospital, Pordenone

CCST with Honours. Thesis: *“Mild Therapeutic Hypothermia in the Treatment of Ischemia-Reperfusion Brain Damage after Cardiac Arrest”*. For further information: Prof. Marinella Astuto, Training Programme Director, marinella.astuto@policlinico.unict.it

Advanced skills in Practical Procedures

- Nasal and Oral Fibre-optic intubation, and Flexible Bronchoscopy.
- Percutaneous Tracheostomy
- Port-a-cath positioning.
- Trans-Esophageal and Trans-Thoracic Echocardiography

Memberships

Full membership of ESICM since 2012.

Full membership of ITACTA since April 2013.

Full membership of SIAARTI since November 2015.

Associate Member ESA February 2016.

Invited speaker and teaching activity

1. Speaker at the 40th **Annual Meeting of the Society of Cardiovascular Anesthesiologists (SCA)**. Title: “Limitations of Echocardiographic Grading of Mitral Regurgitation”. Phoenix, Arizona (US) 28th-May 2nd April, 2018
2. Faculty at the **ESICM LIVES 2017**. Invited faculty for echocardiography teaching and simulation. Vienna 23rd – 27th September 2017
3. Speaker at the **ACE Meeting**. Title: “Diastolic Dysfunction: does it matter in everyday practice? A lecture for non-cardiac anaesthetist!” Manchester, 21st July 2017
4. Speaker at the **MedTASS-Caract Congress**. Title: “Pharmacological support of the Low Cardiac Output Syndrome”. Palermo 6th-8th April 2017
5. Faculty at the **ESICM LIVES 2016**. Invited faculty for echocardiography teaching and simulation. Milan 1st-5th October 2016
6. Speaker at **SIVEC (Siena Vascular and Endovascular Course)**. Title: “Aortic emergencies: anesthesiological approach and organ protection”. Siena 6th Sep 2016
7. Speaker at **New insights in Heart Valve surgery**. Title: “Assessment of MR in the OR: role and feasibility of 3-D echo, the anesthesiologist perspective”. Palermo 4th Apr 2016
8. Speaker at **Siena-CPB course**. Title: “Indices of Metabolic Stress” Siena 11th-12th Mar 2016
9. Chair of the Congress and Speaker at the **II° Intensive Care Update**. Titles: “Diastolic Dysfunction in sepsis: is there a role for beta-blockers?” and “Protecting the Right Ventricle during Mechanical Ventilation”. Catania, 20th-21st Nov 2015
10. Speaker at the **Mediterranean Meeting Anesthesia, Rianimazione e Emergenza (MAARE)**. Title: “Systolic and Diastolic dysfunction in patients with sepsis”. Palermo 10th-12th Sep 2015
11. Faculty member of Course for **Focused Intensive Care Echocardiography (FICE) Accreditation** held at the UCLH. London 22nd Aug 2014
12. Chair of the Congress and Speaker at the **Update in TEE, Cardiac Anaesthesia and Critical Care**. Titles: “Contra Off-pump Cardiac Surgery”; “The importance of TEE Accreditation”; Importance of Diastolic Dysfunction and assessment with TEE”. Catania, 15th Apr 2014
13. Speaker at **ACD SIAARTI Congress 2013**. Title: “Catania Pain Out Project 2010–2012. Methods and results of a translational clinical research”. Pordenone, 19th-21st Sep 2013
14. Speaker at the **International Conference on Acute Pain 2012**. Title: “Pain Out Project in a single city. Methods and preliminary results”. Berlin 22nd – 23rd November 2012
15. Speaker at the **XXV° Emergency & Critical Care Medicine**. Title: “Mild Therapeutic Hypothermia in the treatment of survivors to Cardiac Arrest”. Catania (Italy) 30th April 2010

16. Speaker at the **Project “Hospital without Pain”**. Title: “Management and treatment of the Postoperative Pain”. Pordenone (Italy) 3rd April 2008

Some of lectures I have provided during in-hospital teaching:

- Process of Anaesthesia and Perioperative medicine.
- Therapeutic Hypothermia after CA: evidence, implementation and side effects.
- Protecting the RV during mechanical ventilation.
- Heparin induced thrombocytopenia.
- Assessment of Left ventricular Systolic function (TEE).
- Assessment of Left ventricular Diastolic function (TEE).
- 3-D TEE: theory and usefulness in clinical practice.
- Relevance of Diastolic dysfunction in Intensive Care.
- On-pump vs Off pump CABG: the current evidence.
- TTM Trial: results and new approach to the CA patients (NEJM, JC).
- IABP-Shock II trial 12-month results (Lancet, JC).
- Use of tranexamic acid in combined valve/graft cardiac surgery in the elderly (JC).
- Off-pump or On-pump CABG for IHD (Cochrane Coll., JC).
- Off-pump or On-pump CABG at 30 days and at 1 year - CORONARY TRIAL (both NEJM, JC).
- ATACAS trial on tranexamic acid during cardiac surgery (NEJM, JC).
- Comparison of high and low dose tranexamic acid during cardiac surgery (Anesthesiology, JC).

ACADEMIC AND MANAGEMENT

Ph.D. in Experimental and Clinical Pharmacology

January 2010 - March 2013

My PhD has been developed around the PAIN OUT Project, investigating the management of acute postoperative pain from patient's perspectives. I was the Collaborator of the Pilot Study of this Project during my experience in Pordenone (May-July 2008). This pilot has been published on the European Journal of Pain. I was subsequently involved by the IASP in joining the "PAIN OUT Project International". I was the Coordinator for the centre of Catania and I obtained a grant from the University of Catania. After approval of the Ethic Committee, we started data collection on the 1st April 2010, involving all the major Hospitals of Catania and different surgical specialties (Gynecology, General Surgery, Orthopedics and Urology). At the end of the two-year period of study, Catania hugely contributed to the data worldwide data collection by providing over 2.700 cases (9.6% of the overall data in 56 centres). The thesis ("Pain Out International Project: treatment of postoperative pain in Catania's area – Patient's perspectives") has been successfully defended on the 18.03.2013. Publications are under finalization. Further information: Prof. Renato Bernardini, Coordinator of the PhD program Renato.bernardini@yahoo.it

Postgraduate research activity

- Collaborator of the pilot study of "Pain Out Project", a web-based benchmarking project for collecting data about postoperative pain.
- Co-investigator of a multi-centric, double blind randomized study on an inhibitor of the Factor Xa in patients undergoing knee arthroplasty.
- Investigator of a double-blind randomized study on the efficacy of transdermal buprenorphine in the treatment of post-operative pain of patients undergoing elective open hysterectomy.

Undergraduate research

July 2003 – July 2005

I undertook research at the Department of Neuropharmacology, University of Catania where I developed my medical degree thesis - "Neuroprotection by an inhibitor of Ca⁺⁺-calmodulin kinase in an experimental model of cerebral ischemia" - discussed on the 28.07.2005.

Prizes

- First prize - Best Oral Communication - X° WFSICCM 2009, Florence – 28th Aug/1st Sep 2009. *Aggressive post-resuscitation care improves outcome and reduces days of ventilation and ICU stay.* Sanfilippo F, Pellis T, Roncarati A, et al. Presenting Author: F. Sanfilippo
- Runner-up prize - East Anglia Intensive Care Group Meeting, Cambridge (UK) 22nd Nov 2011. *Hospital acquired H1N1 infection during 2010 – 2011 pandemic. A single centre experience.* Sanfilippo F, Veenith T, Ercole A, et al. Presenting Author: F. Sanfilippo.
- Best award for “**Excellence in clinical teaching of residents**” by the **University of Pittsburgh**. I am the first Faculty member not based in Pittsburgh receiving such prestigious prize.

Chapters

- Resuscitation and Ethics: How to Deal with the “Do not Resuscitate Order”? Santonocito C, **Sanfilippo F**, Ristagno G, Gullo A. Chap 22. Resuscitation. Springer Ed. 2014
- Effectiveness of Hypothermia in Human Cardiac Arrest and Update on the Target Temperature Management-Trial. Pellis T, **Sanfilippo F**, Roncarati A, Mione V. Chap 16. Resuscitation. Springer Ed. 2014
- Post-Resuscitation Hypothermia and Monitoring. Pellis T, **Sanfilippo F**, Roncarati A, Mione V. Anaesthesia, Pharmacology, Intensive Care and Emergency A.P.I.C.E. Springer Ed. 2014

Publications

Author of 50 publications on Pubmed ([link](#))

Randomized controlled trial

1. Transdermal buprenorphine for postoperative pain control in gynecological surgery: a prospective randomized study. Setti T, **Sanfilippo F**, Leykin Y. *Curr Med Res Opin*. 2012 Oct;28(10):1597-608

Meta-analyses

2. Levosimendan for patients with severely reduced left ventricular systolic function and/or low cardiac output syndrome undergoing cardiac surgery: a systematic review and meta-analysis. **Sanfilippo F**, Knight JB, Scolletta S, Santonocito C, Pastore F, Lorini FL, Tritapepe L, Morelli A, Arcadipane A. *Critical care* (London, England). 2017; 21(1):252.
3. Tissue Doppler assessment of diastolic function and relationship with mortality in critically ill septic patients: a systematic review and meta-analysis. **Sanfilippo F**, Corredor C, Arcadipane A, Landesberg G, Vieillard-Baron A, Cecconi M, Fletcher N. *British journal of anaesthesia*. 2017; 119(4):583-594
4. Central venous pressure monitoring via peripherally or centrally inserted central catheters: a systematic review and meta-analysis. **Sanfilippo F**, Noto A, Martucci G, Farbo M, Burgio G, Biasucci DG. *J Vasc Access*. 2017 Jul 14;18(4):273-278
5. Meta-Analysis of Electroacupuncture in Cardiac Anesthesia and Intensive Care. Asmussen S, Przkora R, Maybauer DM, Fraser JF, **Sanfilippo F**, Jennings K, Adamzik M, Maybauer MO. *J Intensive Care Med*. 2017 Jan 1
6. Mitral Regurgitation Grading in the Operating Room: A Systematic Review and Meta-analysis Comparing Preoperative and Intraoperative Assessments During Cardiac Surgery. **Sanfilippo F**, Johnson C, Bellavia D, Morsolini M, Romano G, Santonocito C, Centineo L, Pastore F, Pilato M, Arcadipane A. *J Cardiothorac Vasc Anesth*. 2017; 31(5):1681-1691
7. Amiodarone or Lidocaine for cardiac arrest: a systematic review and meta-analysis. **Sanfilippo F**, Corredor C, Santonocito C, Panarello G, Arcadipane A, Ristagno G, Pellis T. *Resuscitation*, 2016 Oct;107:31-7
8. Cerebral oximetry and return of spontaneous circulation after cardiac arrest: A systematic review and meta-analysis. **Sanfilippo F**, Serena G, Corredor C, Benedetto U, Maybauer MO, Al-Subaie N, Madden B, Oddo M, Cecconi M. *Resuscitation*. 2015 Sep;94:67-72.
9. Diastolic dysfunction and mortality in septic patients: a systematic review and meta-analysis. **Sanfilippo F**, Corredor C, Fletcher N, Landesberg G, Benedetto U, Foex P, Cecconi M. *Intensive Care Med*. 2015 Jun;41(6):1004-13.

Prospective studies

10. Incidence and Factors Associated with Burnout in Anesthesiology: A Systematic Review. **Sanfilippo F**, Noto A, Foresta G, Santonocito C, Palumbo GJ, Arcadipane A, Maybauer DM, Maybauer MO. *BioMed research international*. 2017
11. Influence of the thoracic epidural anesthesia on the left ventricular function: an echocardiographic study. Miró M, **Sanfilippo F**, Pérez F, García Del Valle S, Gómez-Arnau JI. *Minerva Anesthesiol*. 2017 Jul;83(7):695-704
12. Remifentanyl and worse patient-reported outcomes regarding postoperative pain management after thyroidectomy. **Sanfilippo F**, Conticello C, Santonocito C, Minardi C, Palermo F, Bernardini R, Gullo A, Astuto M. *J Clin Anesth*. 2016 Jun;31:27-33.
13. A four year implementation strategy of aggressive post-resuscitation care and temperature management after cardiac arrest. Pellis T, **Sanfilippo F**, Roncarati A, Dibenedetto F,

Franceschino E, Lovisa D, Magagnin L, Mercante WP, Mione V. *Resuscitation*. 2014 Sep;85(9):1251-6

Retrospective studies

14. Anticoagulation and Transfusions Management in Venovenous ECMO for ARDS: Assessment of Factors Associated With Transfusion Requirements and Mortality. Martucci G, Panarello G, Occhipinti G, Ferrazza V, Tuzzolino F, Bellavia D, **Sanfilippo F**, Santonocito C, Bertani A, Vitulo P, Pilato M, Arcadipane A. *J Intensive Care Med*. 2017 Jan 1
15. The Effects of On-Pump and Off-Pump Coronary Artery Bypass Surgery on Respiratory Function in the Early Postoperative Period. Chiarenza F, Tsoutsouras T, Cassisi C, Santonocito C, Gerry S, Astuto M, George S, **Sanfilippo F**. *J Intensive Care Med*. 2017
16. The Effects of On-Pump and Off-Pump Coronary Artery Bypass Surgery on Metabolic Profiles in the Early Postoperative Period. **Sanfilippo F**, Chiarenza F, Cassisi C, Santonocito C, Tsoutsouras T, Trivella M, Gerry S, Astuto M, George S, Taggart DP. *J Cardiothorac Vasc Anesth*. 2016 Aug;30(4):909-16
17. Liver function test abnormalities after traumatic brain injury: is hepato-biliary ultrasound a sensitive diagnostic tool? **Sanfilippo F**, Veenith T, Santonocito C, Vrettou CS, Matta BF. *Br J Anaesth* 2014 Feb;112(2):298-303
18. Nosocomial H1N1 infection during 2010-2011 pandemic: a retrospective cohort study from a tertiary referral hospital. Veenith T, **Sanfilippo F**, Ercole A, Carter E, Goldman N, Bradley PG, Gunning K, Burnstein RM. *J Hosp Infect*. 2012 Jul;81(3):202-5.

Systematic reviews

19. Bivalirudin for Alternative Anticoagulation in Extracorporeal Membrane Oxygenation: A Systematic Review. **Sanfilippo F**, Asmussen S, Maybauer DM, Santonocito C, Fraser JF, Erdoes G, Maybauer MO. *J Intensive Care Med*. 2016 Jun 29.
20. The Easytube for airway management: A systematic review of clinical and simulation studies. **Sanfilippo F**, Chiarenza F, Maybauer DM, Maybauer MO. *J Clin Anesth*. 2016 Jun;31:215-22.
21. Beta-blocker use in severe sepsis and septic shock: a systematic review. **Sanfilippo F**, Santonocito C, Morelli A, Foex P. *Curr Med Res Opin*. 2015 Aug 19:1-9
22. The Role of Neuromuscular Blockade in Patients with Traumatic Brain Injury: A Systematic Review. **Sanfilippo F**, Santonocito C, Veenith T, Astuto M, Maybauer MO. *Neurocritical Care* 2015; 22(2):325-34.
23. Transesophageal echocardiography in the management of burn patients. Maybauer MO, Asmussen S, Platts DG, Fraser JF, **Sanfilippo F**, Maybauer DM. *Burns*. 2014 Jun;40(4):630-5

Reviews

24. Remifentanyl-induced postoperative hyperalgesia: current perspectives on mechanisms and therapeutic strategies. Santonocito C, Noto A, Crimi C, **Sanfilippo F**. *Local and regional anaesthesia*. 2018; 11:15-23.
25. The optimal hemodynamics management of post-cardiac arrest shock. Pellis T, **Sanfilippo F**, Ristagno G. *Best Pract Res Clin Anaesthesiol*. 2015 Dec;29(4):485-95.
26. Use of beta-blockers in non-cardiac surgery: an open debate! **Sanfilippo F**, Santonocito C, Foëx P. *Minerva Anestesiologica* 2013 Oct 31.
27. Spectrum of Sepsis, Mediators, Importance of Source Control and Management of Bundles. Gullo A, Foti A, Murabito P, Li Volti G, Astuto M, Stissi C, Rubulotta F, **Sanfilippo F**, Santonocito C, Ristagno G. *Front Biosci*. 2010 Jun 1; 2: 906-11.
28. Clinical biomarkers in brain injury: a lesson from cardiac arrest. **Sanfilippo F**, Li Volti G, Ristagno G, Murabito P, Pellis T, Astuto M, Gullo A. *Front Biosci* 2010 Jan 1; S2, 623-640.

Editorials/Letter to the Editor

29. Impact of Sternotomy and Pericardial Opening in Patients With Ventricular Septal Defects: Assess Before Sawing! **Sanfilippo F**, Di Gesaro G, Serretta R, Raffa G, Clemenza F. *Anesth Analg*. 2017; 125(3):1073.
30. Video Laryngoscopes and Best Rescue Strategy for Unexpected Difficult Airways: Do Not Forget a Combined Approach with Flexible Bronchoscopy! **Sanfilippo F**, Chiaramonte G, Sgalambro F. *Anesthesiology*. 2017 Jun;126(6):1203
31. Fluids in cardiac surgery: sailing calm on a stormy sea? Common sense is the guidance. **Sanfilippo F**, Scolletta S. *Minerva Anesthesiol*. 2017 Jun;83(6):537-539
32. The importance of diastolic dysfunction in the development of weaning-induced pulmonary oedema. **Sanfilippo F**, Santonocito C, Burgio G, Arcadipane A. *Crit Care*. 2017 Feb 11;21(1):29
33. Esmolol in septic shock: old pathophysiological concepts, an old drug, perhaps a new hemodynamic strategy in the right patient. Morelli A, **Sanfilippo F**, Romano SM. *J Thorac Dis*. 2016 Nov;8(11):3059-3062
34. The Role of Intraoperative Management on Postoperative Hemodynamic and Metabolic Profile After Coronary Artery Bypass Grafting. Cassisi C, Tsoutsouras T, Chiarenza F, Santonocito C, **Sanfilippo F**. *J Cardiothorac Vasc Anesth*. 2017 Feb;31(1):e9-e10
35. The role of speckle tracking echocardiography for prognostication in patients with severe sepsis or septic shock. **Sanfilippo F**, Santonocito C, Panarello G, Arcadipane A. *Crit Care*. 2016 Sep 12;20:284
36. Transoesophageal echocardiography skills. **Sanfilippo F**, Arcadipane A, Scolletta S. *Anaesthesia*. 2016 May;71(5):598.
37. Influence of Thrombolysis and Mechanical Ventilation on Echocardiographic Predictors of Survival after Acute Pulmonary Embolism. **Sanfilippo F**, Corredor C, Cecconi M, Fletcher N. *J Am Soc Echocardiogr*. 2015 Jul;28(7):846
38. Perspectives on the importance of postoperative ileus. **Sanfilippo F**, Spoletini G. *Curr Med Res Opin*. 2015 Apr;31(4):675-6.
39. Management of difficult airways: which is the safest approach after reviewing virtual laryngo-tracheo-bronchoscopy imaging? **Sanfilippo F**, Sgalambro F, Astuto M. *Anesthesiology*. 2015 Feb;122(2):469.
40. Limited echocardiography in the management of critically ill patients in shock. **Sanfilippo F**, Maybauer MO, Sankar V. *J Crit Care* 2015 Apr;30(2):430
41. Effects and Timing of Tranexamic Acid on Transfusion Requirements in Patients Undergoing Cardiac Surgery with Cardiopulmonary Bypass. **Sanfilippo F**, Astuto M, Maybauer MO. *Anesthesiology*, Oct 2014;121(4):902.
42. Virtual laryngoscopy and combined laryngoscopic–bronchoscopic approach for safe management of obstructive upper airways lesions. Sgalambro F, **Sanfilippo F**, Santonocito C, Caltavuturo C, Grillo C. *Brit J Anaesth* 2014 Aug;113(2):304-6.
43. Short-acting β -blocker administration in patients with septic shock. **Sanfilippo F**, Santonocito C, Maybauer MO. *JAMA*, 2014 Feb 19;311(7):736.
44. Major changes in practice and interpreting data from the past. **Sanfilippo F**, Santonocito C, Foex P. *BMJ*. 2014 Jan 29;348:g1131.
45. Off-pump or on-pump coronary-artery bypass grafting. **Sanfilippo F**, Santonocito C, Maybauer MO. *N Engl J Med* 2013 Jul 11; 369 (2):194
46. Routine screening and anticipation of difficult airways in the critical care setting. **Sanfilippo F**, Santonocito C, Maybauer MO. *Minerva Anesthesiol*. 2013 Aug;79(8):965-6
47. Therapeutic hypothermia: heat transfer from warmed endotracheal tubes to oesophageal temperature probes poses risk of life-threatening overcooling. Lavino A, **Sanfilippo F**, Gupta AK. *Br J Anaesth* 2012 Feb;108(2):328-9

Case reports

48. Severe vasospastic angina complicated by multiple pulseless electrical activity arrests. Martin J, **Sanfilippo F**, Bradlow W, Sabharwal NK. *Lancet* 2013; Aug 3;382(9890):478.
49. Perioperative management of an adult patient with childhood cerebral X-linked adrenoleukodystrophy. Leykin Y, **Sanfilippo F**, Crespi L, Pellis T. *Eur J Anaesthesiol.* 2010 Feb;27(2):214-6.

Abstracts & posters

- 1 Abstract for oral presentation, EACTA Congress, Florence 17th-19th Aug 2014
- Preoperative fasting and postoperative metabolic response after coronary artery bypass grafting.
Cassisi C, Chiarenza F, Sanfilippo F et al.
- 1 Abstract for oral presentation, ESICM Congress, Barcelona 27th Sep -1st Oct 2014
- ON- vs OFF-pump CABG: effects on postoperative lactate, BE and pH over the first 24 hours in intensive care
Chiarenza F, Cassisi C, Sanfilippo F et al.
- 1 Abstracts for oral presentation, ESA Congress, Milan 6th-9th Jun 2009
- Transdermal buprenorphine in the management of post-operative acute pain following open hysterectomy – preliminary report.
Y. Leykin, T. Setti, F. Sanfilippo, et al.
- 4 Abstracts for oral presentation, X^o WFSICCM Congress, Florence 28th Aug – 1st Sep 2009:
- Reevaluating prognosis after mild therapeutic hypothermia in unconscious victims of cardiac arrest”.
F. Sanfilippo, T. Pellis, M. Disconzi, et al.
 - Aggressive post-resuscitation care improves outcome and reduces ICU stay and days ventilation”.
F. Sanfilippo, T. Pellis, A. Roncarati, et al. **(First Prize as Best oral communication)**
 - Preventing hyperthermic rebound after mild therapeutic hypothermia: impact on neurological outcome”.
F. Sanfilippo, T. Pellis, F. Gamba, et al..
 - Early achievement of mild hypothermia by out-of-hospital cooling and improved in-hospital induction”.
F. Sanfilippo, T. Pellis, A. Roncarati, F. et al.
- 1 Abstract for oral presentation, S.I.A.A.R.T.I. Congress, Florence 30th Aug – 1st Sep 2009:
- Postoperative pain treatment using different doses of transdermal buprenorphine.
Y. Leykin, T. Setti, F. Sanfilippo, et al.
- 1 Abstract for oral presentation, East Anglia Intensive Care Group Meeting, Cambridge, 22nd Nov 2011.
- Hospital acquired H1N1 infection during 2010 – 2011 pandemic. A single centre experience.
Sanfilippo F, Veenith T, Ercole A, et al
- 2 Posters, I.A.S.P. Congress, Milan 27th - 31st Aug 2012.
- Postoperative pain treatment in gynaecological surgery. A single city – comparison of two hospitals.
Minardi C, Sanfilippo F, Bevelacqua S, et al
 - Patient’s experience on postoperative pain after orthopaedic surgery. A single city – comparison of two hospitals
Sanfilippo F, Minardi C, Bevelacqua S, et al
- 1 Poster, Weil Conference On Cardiac Arrest Shock & Trauma, Milan 8th- 9th Sep 2012.
- Repeated measurements of Neuron-Specific Enolase to determine favourable and poor neurological prognosis after target temperature management.
Di Luca E, Pellis T, Sanfilippo F, et al.
- Several other abstract have been accepted for national and local congresses and are not reported for concision.**

Reviewer's activity

I am active reviewer for: *Ann Int Care (Impact Factor 4.5)*, *Crit Care (IF 4.9)*, *J Crit Care (IF 2.2)*, *J Thor Dis (IF 1.6)*, *Mil Med Res*, *Curr Med Res Opin (IF 2.6)*, *Med Sci Monitor*.

Audits and M&M meeting

I led several audits during my career in UK. The last one was based on extubation after cardiac surgery in CTICU at SGH London; I was also involved in several audits during two years spent in the CTICU in Oxford (appropriate antibiotic prophylaxis in cardiac surgery; new policy for tranexamic acid infusion in theatre and effects on bleeding and blood products transfusion). Two audits have been published. I have participated in audits and M&M meeting during my experience in Cambridge, Oxford and London. I had a key role in developing a group discussion about issues of safety that arose from two separate episodes. From the learning points highlighted by such cases and their discussion at the M&M meeting, we developed a consensus in changing practice to increase the patient's safety. These two cases have been also published with the aim of enhancing the awareness about these potential risks (see my publications *Br J Anaesth 2012*, and *Minerva Anesthesiol 2013*).

Before CCST, I had a key role in the ICU audit group reviewing the protocol for treatment of cardiac arrest patients with Target Temperature Management. We established 3 audit processes over 4 years, and I analysed the data. We reviewed strengths and weak points of the protocol, introducing changes and re-auditing. This study has been published: *A four year implementation strategy of aggressive post-resuscitation care and temperature management after cardiac arrest. Resuscitation. 2014*.

Academic Link

In September 2013, I established an academic link between the Oxford Heart Centre and the Specialization School in Anaesthesia and Intensive Care of the University of Catania. Two Catania's trainee came to Oxford for a six-month honorary fellowship in Cardiac Anaesthesia and Critical Care, with the aim also to develop a research projects. A third trainee replaced them for six-month period.

Activity with ESICM and SIAARTI Society

I am involved with the ESICM, especially in the Cardiovascular Dynamics Section, and I am active part of the "ESICM Journal Review Group" reviewing three-to-four papers per year ([link](#)). I am reviewing part of the PACT module on Cardiovascular Dynamics, and in July I started as associate member of the ESICM E-Learning Committee.

I am active part of the Cardio-thoraco-vascular Group of study of the Italian Society (SIAARTI). In particular, I am responsible for website update ([link](#)), and I am the representative for South Italy ([link](#)).

Most relevant Congresses and courses

1. A.P.I.C.E. International Congress 2007. Venice, (Italy) Nov 2007
2. Course on the management of Difficult Airways. Pordenone (Italy), 15th Nov 2008.
3. XXII° National Congress SITI (Italian Society Intensive Care), Pordenone, 11th -12th Dec 2008.
4. “Mild Therapeutic Hypothermia after Cardiac Arrest”, Pordenone (Italy), 4th Mar 2009.
5. XX° Congress SMART, Milan (Italy), 30th May – 1st Jun 2009
6. X° Congress WFSICCM, Florence (Italy), 28th Aug – 1st Sep 2009
7. Leadership Course, Cambridge (UK), 5th-6th Oct 2011.
8. 32nd ISICEM - Brussels (Belgium), 20th – 23rd Mar 2012.
9. Advanced Communication Skills – Oxford (UK), 1st Jun 2012.
10. The Newcastle Echo Course. Newcastle (UK), 18th -20th Sep 2012.
11. LIVES ESICM Congress, Barcelona (Spain), 27th Sep – 1st Oct 2014.
12. Lungs getting at the Heart of it (ESICM Conference), Dublin (Ireland), 11th – 13th Jun 2015
13. LIVES ESICM Congress, Milan, 1st – 5th Oct 2016.
14. Corso di ecocardiografia transesofagea 3D. Lugano (Svizzera), 7th – 11th Nov 2016.
15. GIMBE (Italian Group on EBM). Applicazione nella pratica quotidiana dei principi e delle procedure dell’Evidence-Based Practice. Palermo 5th - 7th Jul 2016
16. 70° National Congress SIAARTI, Naples 26th – 29th October 2016
17. GIMBE (Italian Group on EBM). Trial clinici: pianificazione, conduzione, analisi e reporting. Palermo 13th–16th Mar 2017
18. MedTASS-Caract Congress. Palermo 6th-8th April 2017
19. GIMBE (Italian Group on EBM). Studi Osservazionali: pianificazione, conduzione, analisi e reporting. Palermo 30th May–01st Jun 2017

Computer/IT skills

I am competent in using Microsoft Office package (Word, Excel, Power Point) and Internet. I have also worked with different software designed for the management of patients in Intensive Care Unit (ICIP Phillips Carevue[®], Allscripts Sunrise[®]). I am competent in using NHS Athens resources for systematic searches in databases such MEDLINE and EMBASE. I have statistical skills in performing statistical analysis through SPSS (i.e. descriptive analysis, parametric/non-parametric tests, etc) and competent in meta-analysis using RevMan.

REFEREES

Dr Antonio Arcadipane – Head of the Department of Anaesthesia and Critical Care, ISMETT, Palermo

aarcadipane@ismett.edu

Prof Brendan Madden – Consultant cardiothoracic and ITU physician; Director, Endobronchial Interventions & Pulmonary Hypertension Services, St Georges Hospital NHS Trust, London

Brendan.Madden@stgeorges.nhs.uk

Dr Hanif Meeran – Lead of the Cardio-Thoracic ICU, Critical Care Directorate, St Georges Hospital NHS Trust, London

Hanif.Meeran@stgeorges.nhs.uk

Dr Shane George – Lead of the Cardio-Thoracic Critical Care, Oxford Heart Centre, John Radcliffe Hospital, Oxford University Hospitals NHS Trust

shane.george@ouh.nhs.uk

Prof Marc Oliver Maybauer - Professor, Philipps University, Marburg, Germany; Honorary Associate Professor, University of Queensland, Brisbane, Australia;

momaybau@aol.com

Dr Rhys Evans – Consultant Cardio-Thoracic Critical Care, Oxford Heart Centre, John Radcliffe Hospital, Oxford University Hospitals NHS Trust, and Reader at Oxford University

rhys.evans@dpag.ox.ac.uk

Dr Basil F Matta – Clinical Director of the Emergency and Perioperative Care Department, Cambridge University Hospital - Addenbrooke's Teaching Hospital, NHS Foundation Trust

basil.matta@addenbrookes.nhs.uk

Dr Peter Bradley – Consultant at John Farman Intensive Care Unit, Cambridge University Hospital - Addenbrooke's Teaching Hospital, NHS Foundation Trust

peter.bradley@addenbrookes.nhs.uk

Dr Stelios Michael – Clinical Lead Director, Department of GITU, HDU, POSU and Anaesthetics, Northern General Hospital – Sheffield Teaching Hospitals NHS Trust, Sheffield.

stelios.michael@ngh.nhs.uk

