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"Lactate Shift", rather than “Lactate Clearance”, for serial blood lactate monitoring?

Authors (surnames in capitals), highest degree, institutional affiliations:

1. Craig A. WALKER, FRCEM, Department of Emergency Medicine, Royal Infirmary of Edinburgh, NHS Lothian, Edinburgh, UK
2. David M. GRIFFITH, FRCA, Edinburgh Critical Care Research Group, Department of Critical Care, Royal Infirmary of Edinburgh, University of Edinburgh, Edinburgh, UK
3. Alasdair J. GRAY, FRCEM, Emergency Medicine Research Group Edinburgh, Department of Emergency Medicine, Royal Infirmary of Edinburgh, NHS Lothian, Edinburgh, UK
4. Deepankar DATTA, MRCEM, Emergency Medicine Research Group Edinburgh, Department of Emergency Medicine, Royal Infirmary of Edinburgh, NHS Lothian, Edinburgh, UK
5. Alasdair W. HAY, FRCA, Intensive Care Department, King Abdulaziz Medical City, Riyadh, Saudi Arabia

Institution where work was performed:
Royal Infirmary of Edinburgh, 51 Little France Crescent, Old Dalkeith Road, Edinburgh, Midlothian, Scotland, EH16 4SA, United Kingdom

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Corresponding author:
Deepankar DATTA
Emergency Medicine Research Group Edinburgh (EMERGE), Department of Emergency Medicine, Royal Infirmary of Edinburgh, 51 Little France Crescent, Old Dalkeith Road, Edinburgh, Midlothian, Scotland, EH16 4SA, United Kingdom
Phone: +44 (0)131 242 1338
Email: deepankardatta@nhs.net

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Dear Editor

We read with interest Vincent's letter citing our work on blood lactate in septic patients admitted to intensive care, and broadly agree with the points he raised.[1] The term "lactate clearance" has been used for over 20 years in the critical care literature and was originally defined as “the ability to clear lactate to normal levels”. [2] We agree that the use of the term clearance is problematic because in a strict physiological sense clearance is a measure of the volume of blood cleared of a substance per unit of time. Conceptually lactate clearance is also misleading because it ignores the fact that lactate concentration is a product of synthesis as well as clearance.

Despite this limitation, the measurement of lactate clearance in septic patients is widely used because it is straightforward, clinically useful and independently predicts poor outcome.[3-5] Vincent, too, supports serial measurement of lactate but in denouncing the term 'lactate clearance' he does not suggest an acceptable alternative. [1]

We propose using the term "lactate shift" as it describes a change in lactate concentration over time and avoids the use of physiological terminology that has a well recognised alternative interpretation.

CA Walker, DM Griffith, AJ Gray, D Datta, AW Hay


