

Let me, at the outset, extend a very warm festive greetings from me and the members of the editorial team of the IJCCR and publication team from Jaypee Brothers Medical Publishers. Due to combined effort of the reviewers and the publication team, we are able to publish IJCCR on time and are doing well on performance metrics of a journal. This will pave the way for applying for indexing in PubMed and other search engines. We hope to get this indexed by next year. This issue also brings you a basket of interesting case reports starting from a bedside case discussion in a Q&A format of a case of thrombocytopenia. These reports have been meticulously prepared by Dr Ramesh Venkatraman and his team and we are ever so thankful to him. This format gives a flavor of bedside discussion during clinical rounds and is especially helpful to postgraduates. We hope the journal becomes more popular among postgraduates and they continue to contribute to it. This will also improve their writing skills and help them with poster presentations at various congresses. Interventional bronchoscopy is becoming more available in many centers and intensive care physicians need to have a working knowledge of the possibilities and scope of these procedures. A medical and surgical emergency of obstruction of airway by paratracheal mass is presented which was salvaged by a tracheal stent, till definitive therapy could be given. Hematological crisis in obstetrical patients is being increasingly reported. A case of atypical hemolytic uremic syndrome in a postpartum patient is being reported in this issue. With availability of newer therapies in the form of biologicals available now for this entity, the disease becomes eminently treatable. Cytomegalovirus (CMV) infection is commonly present in a latent state and gets reactivated in immunosuppressed states, which are frequently encountered in intensive care units. CMV infections are a diagnostic and management challenge which is aptly described in a case presentation in this issue. It is always heartening to see senior ICU physicians encouraging juniors to participate in case writing. A case is presented of methemoglobinemia in a hemodialysis patient which may be missed if not closely looked for. Esophageal perforation is a rare emergency, so a case report describing its presentation and management is useful for the readers. These kinds of reports give a real-life experience of an uncommon emergency and how it was managed. Even more the resources in which this was managed may be similar to which most of the readers are accustomed to. This gives a more pragmatic approach to manage these problems as described in Western literature from centers with more resources. It is always interesting to read case reports of common conditions presenting uncommonly. A case report of hypomagnesemia, a common clinical condition, presenting as cerebellar ataxia, a rare presentation is described in this issue of the journal. Patient presenting with generalized rigidity presents a diagnostic and therapeutic challenge, with a broad range of differential diagnosis. A case of catatonia with its management aspect is described in this issue. The beauty of critical care is being a horizontal specialty addressing all other subspecialties. This issue of the journal is an example of this with case reports from various specialties. Hope this bouquet of cases will be an educational reading for everyone.

Best wishes!



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