ECMO
Update and COVID

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Disclosure

- None
- ECMO outside of CPB is an off-label use of technology
- And –it’s a team sport
Case

- 53 yo M
- Several day history of symptoms
- Rapid respiratory decline
- Transferred for ECMO
- Noted: Low EF, on inotropes, risk factors
- Due to cardiac dysfunction-> VAV
• VV replaces some of lung function
• VA replaces some of heart and lung function
  – Not good if heart is working

Indications for VAV

- Low EF
- Need for Inotropes
- Rising troponin

Sustained hypotension despite management

Current ELSO COVID Registry

<table>
<thead>
<tr>
<th>Mode</th>
<th>Count (%)</th>
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</thead>
<tbody>
<tr>
<td>VV</td>
<td>147 (91%)</td>
</tr>
<tr>
<td>VA</td>
<td>7 (4%)</td>
</tr>
<tr>
<td>VAV</td>
<td>2 (1%)</td>
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https://www.elso.org/Membership/CenterMap.aspx
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<thead>
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<tbody>
<tr>
<td>Ferritin</td>
<td>Latest Ref Range: 26 - 388 ng/mL</td>
<td>1,125 (H)</td>
<td>1,220 (H)</td>
<td>889 (H)</td>
</tr>
</tbody>
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<thead>
<tr>
<th></th>
<th>Ref. Range</th>
<th>3/30/2020 16:16</th>
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<tbody>
<tr>
<td>Interleukin 6 Blood</td>
<td>Latest Ref Range: &lt;3.01 pg/mL</td>
<td>1,877.83 (H)</td>
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<tbody>
<tr>
<td>CRP Inflammation</td>
<td>Latest Ref Range: 0.0 - 8.0 mg/L</td>
<td>220.0 (H)</td>
<td>170.0 (H)</td>
<td>87.0 (H)</td>
<td>37.0 (H)</td>
<td>18.0 (H)</td>
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</table>

IL-6 Receptor Antagonist
Thank you

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