

# ECBP IN CRITICALLY ILL SEPTIC PATIENTS

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## Objective

Evaluate the hemo-adsorption treatment method for patients with septic shock including

- feasibility and safety
- efficacy for disease's severity improvement
- impact on parameters related with sepsis severity or outcome

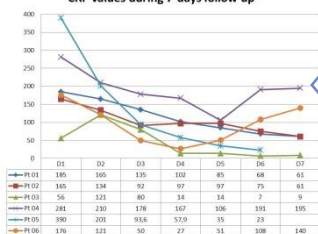
## Method

6 septic patients all with over 2 organ failure, average SOFA score 14

- Adsorber: HA330 Disposable Hemoperfusion Cartridge (Jafron Biomedical)
- Treatment: 6 patients under CRRT + 1 session of HA/day (duration of each session 2h), for 3 consecutive days (3 sessions per patient)
- Observation: 7 days monitoring period with indicators of SOFam, oxygenation, needs of vasoactive drugs, CRP and CTP changes and 7 and 28 days mortality and ICU mortality (compared with an historical control group of 12 similar patients in our ICU).

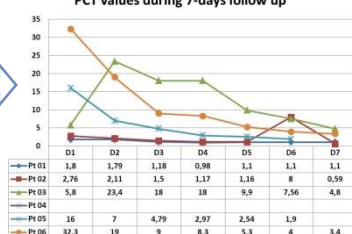
## Results

CRP values during 7-days follow up

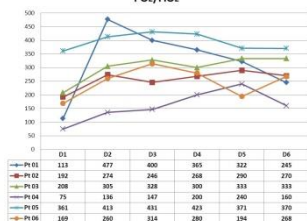


CRP and PCT values decreased in all patients during and after the 3 sessions

PCT values during 7-days follow up

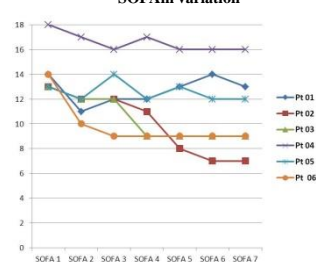


PO<sub>2</sub>/FIO<sub>2</sub>

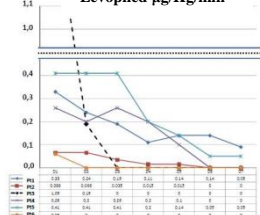


SOFA score decreased due to respiratory and cardiovascular improvement

SOFam variation

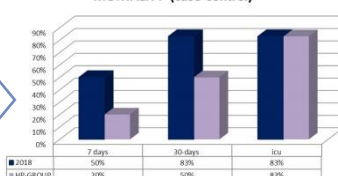


Levophed µg/Kg/min



7 days, 30 days and ICU mortality compared with an historical control group of 12 patients

MORTALITY (case-control)



## Conclusion

Hemo-adsorption (HA330) for septic patients

- Relatively simple, feasible, compatible with most CRRT devices in our ICU
- No complications and no major events were attributed to the HA sessions
- Improvement of respiratory and cardiovascular performance and of hemodynamic status
- Significant sepsis severity reduction (decrease of SOFA score)
- Hypothesis: can be used as a treatment to decrease or at least delay organ failures and therefore to "buy crucial time" within which disease reversibility may be possible with appropriate etiological treatment

38<sup>th</sup> Vicenza Course on AKI&CRRT  
a week of virtual meetings

2-6 November 2020