



Primary Transport on Extracorporeal Membrane Oxygenation: Two Indian Center Experience.

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Abstract

Extracorporeal membrane oxygenation (ECMO) can be a life-saving modality for patients with severe reversible pulmonary and/or cardiac failure, but its use remains restricted to a few highly equipped referral centers. Conventional transports to an ECMO center can be hazardous. Transport teams are usually trained to transfer stable patients across hospitals. As ECMO patients are extremely sick, specially trained critical care teams to deal with all possible complications in these critically ill patients will be required. Therefore, many ECMO centers have developed transport programs with the mobile ECMO team. In this study, we present a brief account of two-center experience of ECMO transport from India.

Retrospective observational study depicting the data of two mobile ECMO teams over a period of 4 years, twenty-one patients (16 years to 74 years) were evaluated. Analysis was done for the transport arrangements, different characteristics of ECMO retrieval patients, their outcomes, and predictors of mortality of a total of 21 patients from 2 different referral centers of India.

The mean distance of travel was 87.24 ± 104.5 km (range 2-250 km) and transportation was by road in all cases. About 38% (n=8/21), patients had suffered from complications during transport like hypotension, cardiac arrest. There were no deaths in connection with transportation. The overall mortality rate was 33.3% with no difference over gender, age, duration of pre-ECMO ventilation, or duration of transport. The most common indication associated with ECMO transport was H1N1 infection.

we found that patient transfer if done with proper protocols by a prepared team with full knowledge of problem areas to a referral institution while on ECMO support seems to be safe and adds no significant risk of mortality to ECMO patients

Biography:

Sandip Gupta is Senior Pediatrician & Intensivist, Indian Academy of Pediatrics, accredited faculty for PICU. He has expertise in different domains of Pediatric critical care like Pediatric Cardiac critical care & ECMO, Liver transplant, Pediatric Emergency, Critical Care Renal Replacement therapy, Peritoneal Dialysis, and Pediatric Retrieval services. Currently, working as a Senior Pediatrician & intensivist at Aster CMI Hospital, Bangalore. The unit is well known for its excellent Pediatric Liver Transplant program and provides the full range of intensive care support including Non-invasive, Conventional, and High-frequency ventilation, Hematopoietic stem cell transplant, cardiac critical..

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