

Extracorporeal Membrane Oxygenation for Cardiac or Pulmonary patients

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. deaths in connection with transportation.

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Biography

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