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Right ventricular dysfunction is common among pediatric patients with acute respiratory distress syndrome on venovenous ecmo

Cara Holton Children's Mercy Hospital

Sanket Shah Children's Mercy Kansas City

Jenna Miller Children's Mercy Hospital

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Right Ventricular Dysfunction is Common among Pediatric Patients with ARDS on VV ECMO

Caroline Holton, MD, Sanket Shah, MD MHS, Jenna Miller, MD FAAP

Children's Mercy Kansas City

Introduction

- RV dysfunction is common in pediatric ARDS (~40%) incidence) and associated with increased mortality^{1,2}
- RV dysfunction typically improves on VV-ECMO with time
- New adult data shows some develop new or worsened RV dysfunction while on VV-ECMO and this is associated with worse outcomes³
- No data to our knowledge on this phenomenon in pediatric patients with ARDS on VV!

Results

25 patients identified

Mechanical Ventilation (days)

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Duration

- 20/25 (80%) survived to decannulation
- 19/25 (76%) survived to ICU discharge
- NEW RV injury seen in 12/25 (48%)
 - 9/12 (75%) survived to decannulation and ICU discharge
 - 2/12 (17%) required conversion to VA-ECMO
- NO RV injury seen in 13/25 (52%)
 - 11/13 (85%) survived to decannulation and 10/13 (77%) to ICU discharge
 - 1/13 (8%) required conversion to VA-ECMO

- 12/25 (48%) were extubated while on ECMO • 6/12 (50%) with RV injury • RV dysfunction more common among long run (>21
- days) patients

- 60% of long runs vs 40% of short runs • 9 survivors with RV dysfunction on ECMO 7/9 had resolution of dysfunction post-ECMO • Time to resolution ranged from 1 to 181 days post-decannulation • 3 patients without RV dysfunction on echo had evidence of RV injury on autopsy or cardiac cath



Methods

- Single center retrospective case series
- January 2010 September 2022
- Inclusion criteria: Neonatal/pediatric patients on VV-ECMO for ARDS with an echo during ECMO run
- Exclusion criteria: single ventricle patients
- Echocardiogram reports were reviewed for evidence of qualitative RV systolic dysfunction, as well as other markers of RV injury including RV hypertrophy, dilation, and TAPSE scores
- Mann-Whitney U test used to compare differences between groups

References



1. Himebauch AS, Yehya N, Wang Y, et al. Early Right Ventricular Systolic Dysfunction and Pulmonary Hypertension Are Associated With Worse Outcomes in Pediatric Acute Respiratory Distress Syndrome, Crit Care Med 2018: 46: e1055-e1062

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3. Chad T. Yusuff H. Zochios V. et al. Right Ventricular Injury Increases Mortality in Patients with Acute Respiratory Distress Syndrome on Veno-Venous Extracorporeal Membrane Oxygenation A Systematic Review and Meta-Analysis. ASAIO Journal 2022; 10.1097



Results

Conclusions

- New RV dysfunction is common among pediatric
- **ARDS patients on VV-ECMO and persists after**
 - decannulation.
- Echo alone may not be sufficient to diagnose
 - clinically relevant RV injury.





