

Update on Extracorporeal Membrane Oxygenation (ECMO)

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Extracorporeal membrane oxygenation, commonly referred to as ECMO, is a therapy that supports failing cardiac and/or pulmonary organ systems. Initial treatment with ECMO had discouraging outcomes, but recent experience with acute respiratory distress syndrome (ARDS) and the H1N1 Influenza A pandemic has led to a resurgence in popularity and research into this technique. Patients are placed on ECMO for a growing list of indications with varying levels of success. At this time, ECMO is delivered only in highly specialized centers with well-trained practitioners. ECMO continues to be labor-intensive and consumes vast amounts of resources. Patients are subjected to a high level of potentially disastrous complications and morbidity and mortality remain high. Despite this, patients continue to receive ECMO as a salvage technique in severe critical illness, and management continues to evolve as our experience with ECMO grows. This review will focus on the application of ECMO in adult patients.

Biography

Marek Brzezinski, MD, PhD is an Associate Professor in the Department of Anesthesia and Perioperative Care at University of California-San Francisco. He received his MD and PhD degrees from the Westfaelische Wilhelms- University in Muenster, Germany. He completed his anesthesia residency at University of Chicago. Subsequently, he went to Massachusetts General Hospital and Duke University where he completed fellowship training in critical care medicine and in cardiothoracic anesthesia, respectively.

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