**ECMO SUPPORT MAY BE EFFECTIVE IN SICKEST COVID-19 PATIENTS: FINDINGS FROM THE INTERNATIONAL ELSO REGISTRY**

*ELSO registry data published in The Lancet shows ECMO-supported patients with COVID-19 have lower than expected mortality 90 days after ECMO*

**ANN ARBOR, MI – Sept. 25, 2020 –** The Extracorporeal Life Support Organization (ELSO) announced today publication in [*The Lancet*](http://www.thelancet.com/journals/lancet/article/PIIS0140-6736%2820%2932008-0/fulltext) of registry findings examining the treatment of COVID-19 patients with extracorporeal membrane oxygenation (ECMO) support*.* The results show that for ECMO-supported patients with COVID-19, estimated in-hospital mortality 90 days after ECMO and mortality rates in those with a final disposition of death or discharge were under 40 percent.

*The Lancet* study utilized the international [ELSO registry](https://www.elso.org/Registry.aspx) to characterize the epidemiology, hospital course, and outcomes of 1,035 ECMO-supported patients with confirmed COVID-19 from 213 hospitals across 36 countries. The generalizable estimate of ECMO mortality and improved mortality rate findings support existing recommendations to consider ECMO in refractory COVID-19-related respiratory failure when performed in experienced centers.

During the COVID-19 pandemic, critical care teams have employed ECMO technology to provide support to the heart and lungs of COVID-19 patients who have developed acute respiratory or cardiac failure. ECMO is a treatment that pumps blood outside the body and then returns the oxygen-rich blood into the body, giving these organs time to rest and heal. When performed by highly skilled and trained critical care teams, ECMO is an option for the sickest COVID-19 patients.

“At the beginning of the COVID-19 pandemic, the role of ECMO was unknown. In response the international ELSO community began collecting and sharing real-time high-quality data through the ELSO Registry.”  said Ryan Barbaro, MD, Chair of ELSO’s Registry Committee and lead author of the study. “The results of this study are a witness of those efforts and the findings support recommendations to consider ECMO when lung protective ventilation fails."

Among the 1,035 eligible ECMO-supported patients with COVID-19, with 67 (6 percent) remaining hospitalized at the end of the study period, the estimated cumulative incidence of in-hospital mortality 90 days after the initiation of ECMO was 37.4 percent. The mortality rate was 39 percent (380/968) among those with a final disposition of death or hospital discharge.

The results support current recommendations that centers experienced in ECMO should consider its use in refractory COVID-19-related respiratory failure.

**About ELSO**

The Extracorporeal Life Support Organization (ELSO) is an international non-profit organization comprised of health care institutions and individuals dedicated to the development and evaluation of novel therapies for the support of failing organ systems. The organization’s mission is to provide continuing education, guideline development, original research, publications, and maintenance of a comprehensive registry of data around use of extracorporeal membrane oxygenation (ECMO) in active ELSO centers. Learn more at [www.elso.org](http://www.elso.org).