

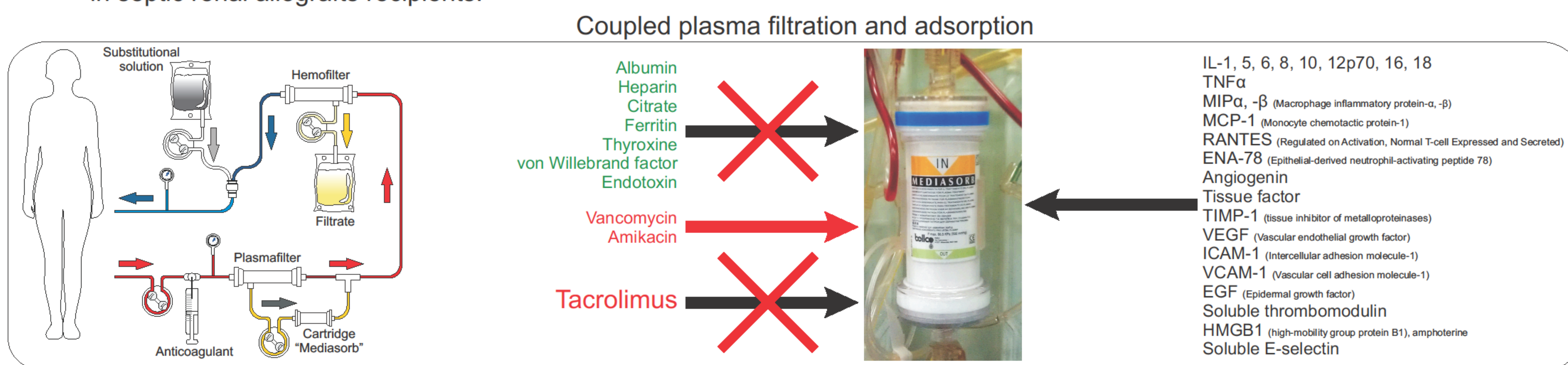


TREATMENT OF SEPSIS IN RENAL TRANSPLANT RECIPIENT
WITH COUPLED PLASMA FILTRATION AND ADSORPTION

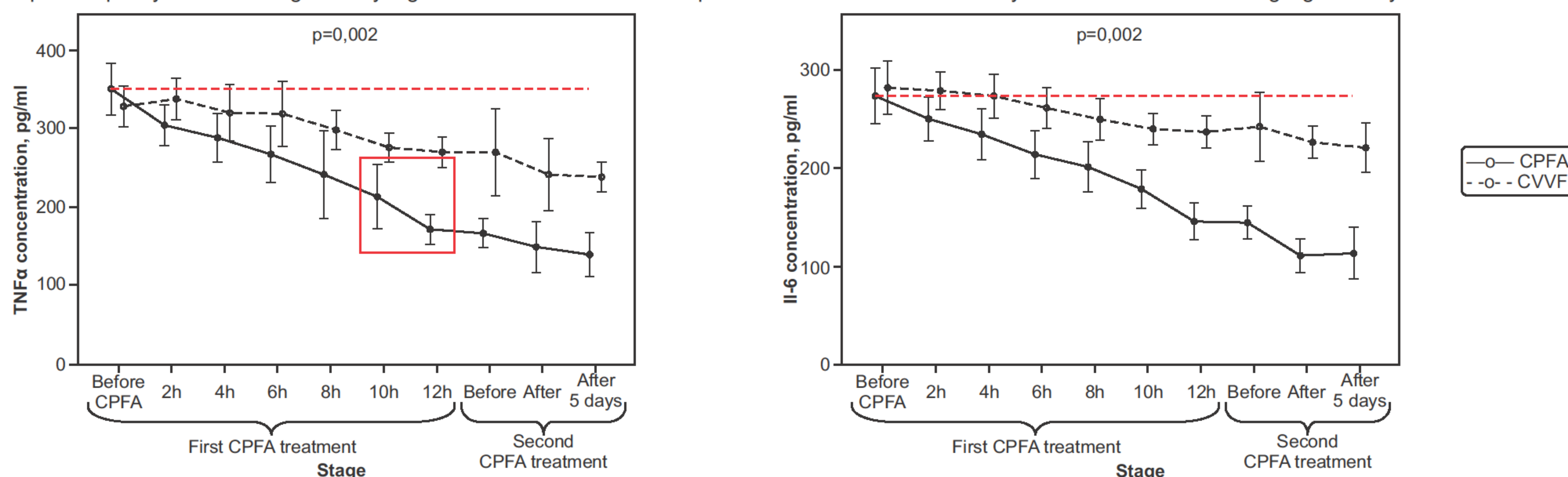
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Septic complications remain an important problem in renal transplant recipients. System inflammatory response in sepsis leads to poor graft function, as well as other organ and systems and can lead to multiple organ failure and death. Extracorporeal therapy can effectively intervene in the pathogenesis of sepsis.

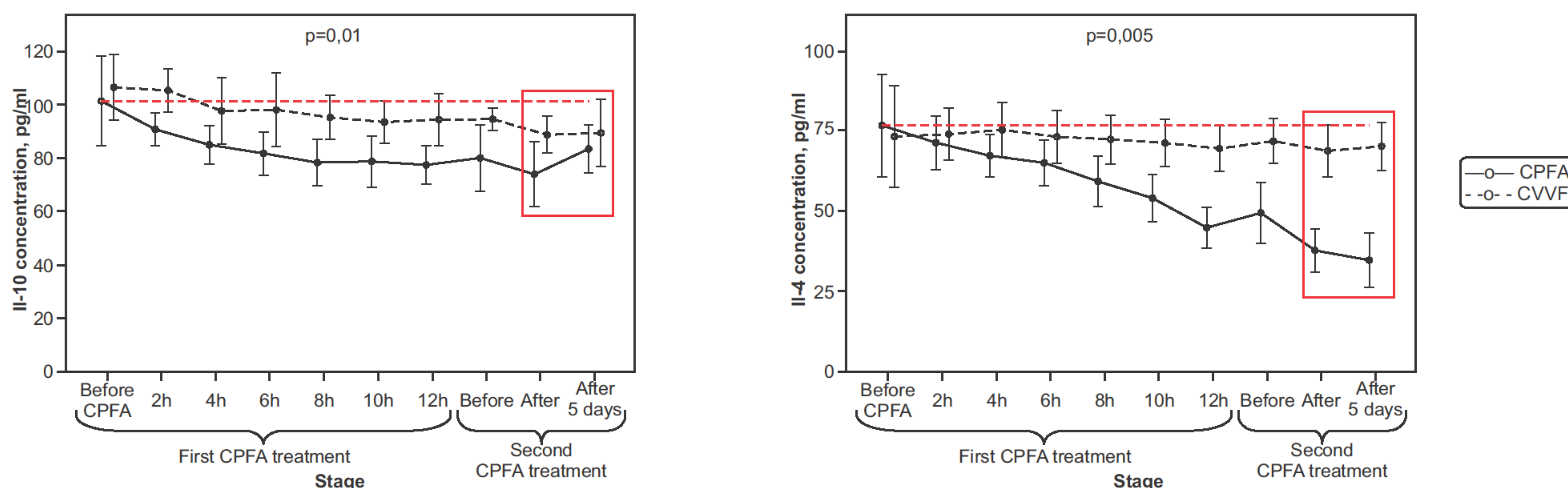
Primary aim: to evaluate the effectiveness of CPFA treatment in reducing the severity of system inflammatory response in septic renal allografts recipients.



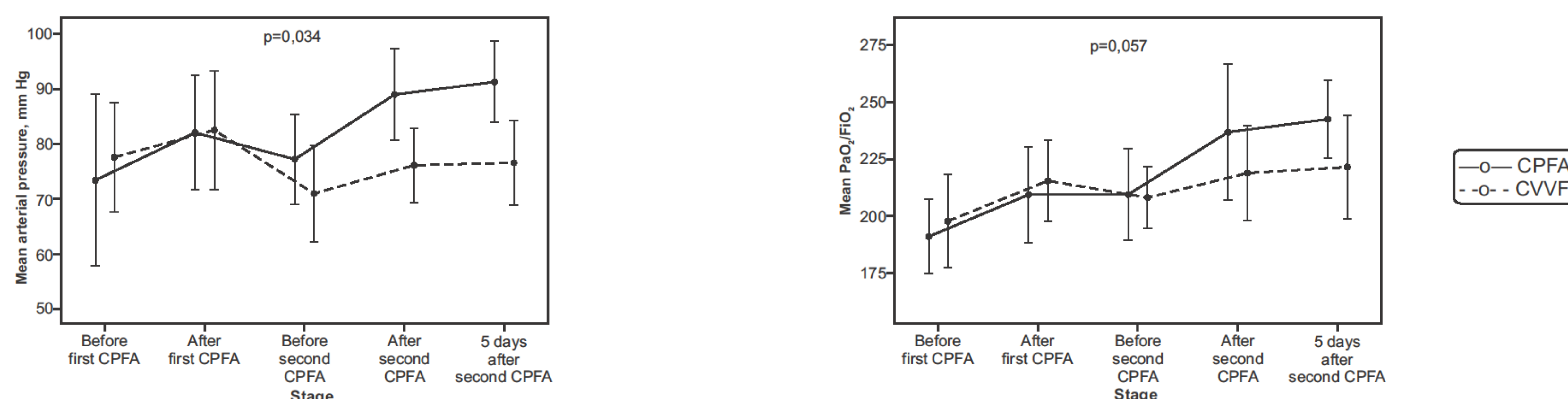
1. We noted a decrease in the concentration of inflammatory cytokines in both groups. The sorption capacity of the cartridge is very high: even after 12 hours of the procedure the concentration of cytokines continued reducing significantly.



2. There was a significant increase in the concentration of anti-inflammatory cytokines. The dynamics of IL-4 and IL-10 concentrations on the 5th day after the second procedure were different.



3. Hemodynamic significantly improved in patients after CPFA. There was not significant improvement in lung respiration.



Conclusion

1. There is a non-selective adsorption of pro- and anti-inflammatory cytokines as a result of CPFA.
2. The sorption capacity of the cartridge is very high.
3. Non-selective removal of cytokines leads to hemodynamic and lung respiration improvement.

