

Improving survival rates among users of left ventricular assist devices

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Despite the general success of left ventricular assist devices (LVADs) used in critically ill heart failure patients, implantation of these devices often leads to increased bleeding and a need for high-volume blood transfusions during and immediately after surgery. A new study published in *Artificial Organs* provides data suggesting that the incidence of these complications may be significantly reduced by way of a single plasma exchange before surgery.

Patients in need of LVAD implantation usually have an abnormal coagulation profile, which can increase the chances of hemorrhagic complications after surgery. To optimize the coagulation profiles of LVAD patients, and thereby reduce the risk of complications, the study suggests replacing 1 plasma volume using fresh frozen plasma as the substitution fluid prior to surgery.

According to this single-center study, a series of patients who underwent plasma exchange before LVAD implantation had notably better survival rates than those who did not. These results were consistent both 7 and 30 days after insertion.

Source: Wiley

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