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Title	URL	PDF	Therapy Areas	Products Mentioned	Main Focus	Key Takehomes
COVID-19-associated acute kidney injury: consensus report of the 25th Acute Disease Quality Initiative (ADQI) Workgroup	/pubmed/33060844/	Y	COVID-19, AKI	None	Consensus report of the 25th ADQI Workgroup meeting on COVID-19-associated acute kidney injury, including BP techniques	Potential biologic rationale: BP techniques have been shown to remove circulating molecules (cytokines, DAMPs, and PAMPs, including endotoxin and circulating viral particles) that potentially contribute to the development of multiple organ failure and mortality in critically ill patients with COVID-19 Potential BP techniques: Hemoperfusion techniques, therapeutic plasma exchange, and CRRT with surface-modified AN69, polymethylmethacrylate, medium cut-off or high cut-off membranes Criteria for BP use: "No consensus exists on the use or thresholds of specific biological and clinical criteria for initiating, monitoring or discontinuing BP in critically ill patients with COVID-19 (not graded)."
Extracorporeal Blood Purification and Organ Support in the Critically Ill Patient during COVID-19 Pandemic: Expert Review and Recommendation	/pubmed/32454500/	Y	COVID-19	Oxiris Cytosorb Toraymyxin	Blood purification and organ support techniques in the context of COVID-19	Rationale for use of extracorporeal therapies in COVID-19: A significant proportion of patients experience cytokine storm and lung, heart, and kidney dysfunction Practical recommendations for critically ill patients with COVID-19: Suggested that cytokine removal strategies should be reserved for patients with evidence of high circulating cytokines or other evidence of hyper-inflammation Membranes (e.g. Oxiris) can be used in CRRT mode.
Continuous renal replacement therapy in cytokine release syndrome following immunotherapy or cellular therapies?	/pubmed/32474415/	Y	Oncology	Oxiris Cytosorb Toraymyxin	Cytokine release following treatment with monoclonal antibody based drugs for hematological and ontological malignancies such as chimeric antigen receptor T cells	Presentation of cytokine release syndrome: Symptoms ranging from mild, flu-like symptoms, to severe life-threatening complications. Symptoms can include multiorgan system failure with pulmonary and renal involvement Need for management strategies: There are patients who experience cytokine release syndrome refractory to tocilizumab and corticosteroid treatment, necessitating next line management strategies Pathophysiological rationale for use of BP therapies: Immunomodulatory role of removing cytokines, as in sepsis and COVID-19
Extracorporeal Blood Purification Therapies for Sepsis	/pubmed/30974444/	Y	Sepsis/septic shock	Oxiris Cytosorb Toraymyxin	Removing endotoxin and cytokines in sepsis: advantages, limits, and clinical evidence	Removing endotoxin and cytokines: Oxiris is the only therapy combining removal of both cytokine and endotoxin Future steps: Further research is needed on the mechanisms of action and possible indications for use of BP in sepsis
Is there a role for blood purification therapies targeting cytokine storm syndrome in critically severe COVID-19 patients?	/pubmed/32438839/	Y	COVID-19	Oxiris Cytosorb	BP in COVID-19: CRRT, cytokine adsorption, and timing of BP therapies	Type of BP: Targeting cytokine removal may result in better outcomes than other BP therapies Timing of initiation: There may be an early 'window of opportunity' where removing inflammatory mediators could be considered, before the cascade effect of inflammatory factors
Expert recommendations on blood purification treatment protocol for patients with severe COVID-19 - Recommendation and consensus.	/pubmed/32346492/	Y	COVID-19	Oxiris	Expert recommendations for treatment of patients with severe COVID-19	BP therapies: "When the purpose is the remove inflammatory mediators, it is recommended that filters with absorption properties (such as the AN69ST or Oxiris membrane) be selected"
Blood purification could tackle COVID-19?	/pubmed/34895343/	Y	COVID-19	PMX-DHP Cytosorb Oxiris	Blood purification in the context of COVID-19	BP therapies BP therapies have potential benefit in COVID-19 cases. TPE in particular could be helpful in the clinical management of cytokine storms and coagulopathy. The efficacy of other techniques has also been supported by several clinical and <i>in vitro</i> studies Future steps Further research is needed to elucidate the effect of the application of BP therapies in COVID-19
Hemoperfusion and blood purification strategies in patients with COVID-19: A systematic review	/pubmed/34632596/	Y	COVID-19	PMX-DHP Cytosorb Toraymyxin Oxiris	Systematic review of 11 articles to summarize the evidence regarding HP therapy in COVID-19	Hemoperfusion therapies Studies were of low methodologic quality and clinical evidence. Initiation of hemoperfusion therapies in patients with COVID-19 does not seem to be supported by hard evidence. Prospective randomized data are needed to establish the role of hemoperfusion in patients with COVID-19.
Adsorptive hemofiltration for sepsis management: expert recommendations based on the Asia Pacific experience	/pubmed/34402478/	Y	Sepsis/septic shock	Oxiris	Therapeutic benefits and Delphi consensus recommendations for the use of Oxiris in patients with sepsis in the APAC region	Oxiris There is mounting evidence of the clinical benefits of BP but large clinical studies demonstrating benefits of CRRT with Oxiris are still lacking. The use of Oxiris in APAC is hindered by the limited availability and reliability of endotoxin tests, restricted access to Oxiris and clinician perceptions