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Hemodialysis and hemoperfusion for treatment of poisoning to cardio toxic drugs

Historically, the clinical application of extracorporeal treatments (ECTRs), such as hemodialysis or hemoperfusion, was first intended for poisoned patients. With time, ECTRs were used almost indiscriminately to facilitate the elimination of many poisons, albeit with uncertain clinical benefit. To determine the precise role of ECTRs in poisoning situations, multiple variables need to be considered including a careful risk assessment, the poison's characteristics including toxicokinetics, alternative treatments, the patient's clinical status, and intricacies of available ECTRs, all of which are reviewed in this article. Recently, evidence-based and expert opinion-based recommendations from the EXTRIP workgroup were also published to help minimize the knowledge gap in this area. Here, we will present current systematic reviews and guidelines from the EXTRIP (EXtracorporeal TReatments In Poisonings) workgroup where we discuss potential cardiotoxic drugs such as Digoxin, Tricyclic antidepressants, Carbamazepine.

Biography

Marc Ghannoum is an internist and nephrologist from Montreal Canada. He currently chairs the EXTRIP workgroup and has published over 50 papers and 10 book chapters on the subject of extracorporeal removal of poisons.

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