



Should hemoperfusion be used as an adjunct treatment for COVID-19?

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This rapid review summarizes the available evidence on the efficacy and safety of hemoperfusion as an adjunct treatment for patients with COVID-19. This may change as new evidence emerges.

KEY FINDINGS

There is insufficient evidence to support the routine use of hemoperfusion as an adjunct treatment for COVID-19.

- High concentrations of proinflammatory cytokines have been observed in the plasma of patients with severe COVID-19.
- Hemoperfusion devices have been developed and used for removing cytokines from patients with sepsis and have been proposed as an adjunctive treatment for patients with COVID-19.
- There are currently no published trials that investigate the efficacy and safety of hemoperfusion as an adjunct treatment for COVID-19.
- Indirect evidence from SRs among adult patients with sepsis showed that hemoperfusion does not decrease mortality or increase the risk of serious adverse events (defined as hypotension or massive bleeding).
- There are currently no registered studies on hemoperfusion as an adjunct treatment for COVID-19.
- Current international and local treatment guidelines do not include recommendations on the use of hemoperfusion for the treatment of COVID-19.

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