

# CytoSorb®



## Best practice flowchart infective endocarditis



### Patient selection

CytoSorb® Therapy may be considered during cardiac surgery for acute / active high-risk IE.

Additional criteria for clinical use of CytoSorb® intraoperatively in IE patients may be the following:

- Fever
- Highly elevated inflammatory parameters
- Hemodynamic instability requiring high vasoactive support
- Staphylococcus aureus as pathogen



### Timing

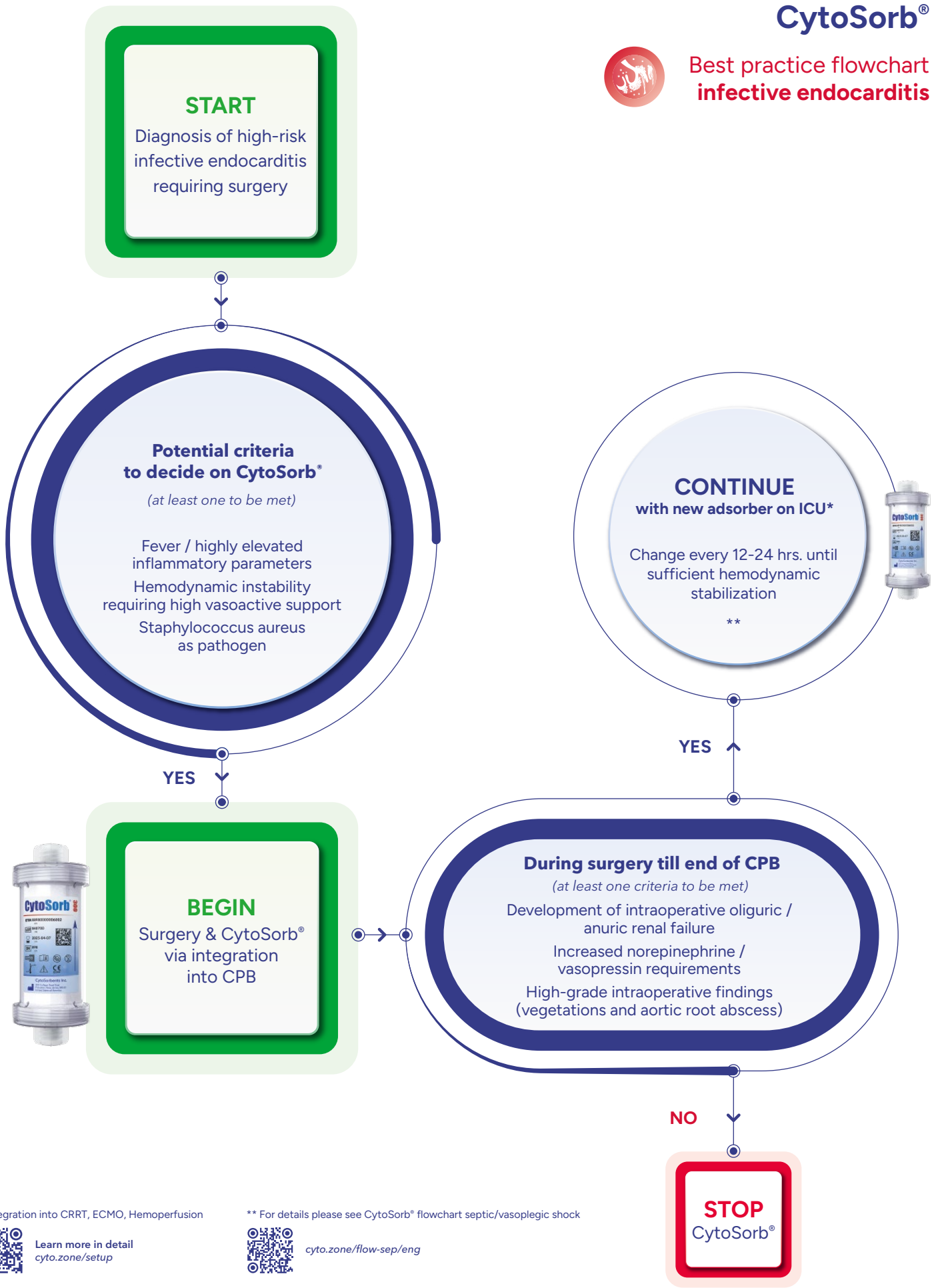
Start therapy with the start of CPB. CytoSorb® is easily integrated into the CPB circuit (post-pump to venous reservoir)



### Dosing

Consider postoperative continuation of CytoSorb® Therapy (with a new adsorber integrated into an extracorporeal circuit) in IE patients when the following signs are observed intraoperatively:

- Development of intraoperative oliguric / anuric renal failure
- Increased norepinephrine / vasopressin requirements
- High-grade intraoperative findings (vegetations and aortic root abscess)



\* Integration into CRRT, ECMO, Hemoperfusion

\*\* For details please see CytoSorb® flowchart septic/vasoplegic shock



Learn more in detail  
[cyto.zone/setup](https://cyto.zone/setup)



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