

# Extracorporeal Membrane Oxygenation Support in Post-Cardiotomy Shock

Citation for published version (APA):

Raffa, G. M. (2019). *Extracorporeal Membrane Oxygenation Support in Post-Cardiotomy Shock*. [Doctoral Thesis, Maastricht University]. ProefschriftMaken. <https://doi.org/10.26481/dis.20191216gr>

## Document status and date:

Published: 01/01/2019

## DOI:

[10.26481/dis.20191216gr](https://doi.org/10.26481/dis.20191216gr)

## Document Version:

Publisher's PDF, also known as Version of record

## Please check the document version of this publication:

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## PROPOSITIONS

1. Heart transplanted patients, suffering from severe early graft dysfunction and requiring veno-arterial extracorporeal membrane oxygenation (ECMO) support after surgery, have a long-term survival comparable to those who have not.
2. The risks of bleeding and rethoracotomy are lower in peripheral veno-arterial ECMO compared to central one in patients requiring mechanical circulatory support for post-cardiotomy shock.
3. Alternative central cannulation strategies (subxyphoid and jugular exit sites) may allow the sternal closure and may reduce the risk of infection in post-cardiotomy ECMO.
4. Effective indirect left ventricle unloading in peripheral veno-arterial ECMO as well as isolated right ventricle support can be achieved by pulmonary artery cannulation.
5. **The mitral valve has a major role in the left ventricle outflow tract obstruction in patient with hypertrophic obstructive cardiomyopathy.**
6. **Topical antibiotics may reduce the risk of sternal wound infection after cardiac surgery.**
7. **Both systemic or endoventricular thrombolysis are effective to treat left ventricle assist device thrombosis.**
8. ***The acquisition of new concepts and modalities of veno-arterial ECMO support have open the way to enhanced modalities and possibilities of further and different type of cardio-circulatory support in post-cardiotomy ECMO.***
9. *I have never caught an amberjack heavier than 8 kg.*
10. *Papa Karol Wojtyła's and Papa Francesco's voices make me happy.*
11. *I like English gramatical errors.*