Extracorporeal membrane oxygenation bridge to adult heart transplantation.
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Overview: Extracorporeal membrane oxygenation (ECMO) can rescue some critical patients with circulatory collapse when intra-aortic balloon pump (IABP) and ventricular assist devices (VAD) are not suitable. A subset of these patients can use ECMO for direct bridging, or indirect double bridging via VAD to heart transplantation (HTx).

Conclusions: Direct VAD implantation, if possible, is preferable to double bridging in patients over 50 yr. Also, elective ECMO support before hemodynamic deterioration to cardiac arrest or multiple organ dysfunction would improve rates of successful ECMO bridging.