

**Here we report on a case with “harlequin phenomenon” after ECLS implementation as a relevant complication of the mode of cannulation and review benefits and risks of commonly used variants of vascular access” Geyer et al (2017).**

Abstract:

Extracorporeal membrane oxygenation (ECMO) and extracorporeal life support (ECLS) are an increasingly established advanced therapy for emerging severe lung and/or cardiocirculatory dysfunction or failure. Several reports have provided evidence for a potential benefit in prognosis by ECLS in cases of cardiogenic shock including cardiopulmonary resuscitation.

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Routine use in specialized centers reduces the incidence of negative side effects (e.g., vascular/ischemic, embolic, hemorrhagic, hemolytic and, furthermore, septic). Vascular complications like not only limb ischemia but also hypoxia proximal to the cannulation site up to complete sectorial hypoxia called “harlequin phenomenon” could refer to be a major adverse event in ECLS which, therefore, should be limited primarily to cardiocirculatory indications. Here we report on a case with “harlequin phenomenon” after ECLS implementation as a relevant complication of the mode of cannulation and review benefits and risks of commonly used variants of vascular access.

Reference:

Geyer, M., Gohrbandt, B., Sagoschen, I., Hartmann, T., Post, F., Vahl, C.F. and Münzel, T. (2017) Pitfalls of cannulation for extracorporeal life support: review of the literature and illustrative case presentation. *Journal of Artificial Organs*. November 9th. .

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