## **CytoSorb® Best Practice**









## **Patient selection**

- Confirmed/ suspected rhabdomyolysis with impending/existing acute kidney injury (AKI)
- Myoglobin levels> 10,000 μg/l
- If myoglobin levels are unavailable, CK levels or myoglobinuria might provide clues as to the status or progression of the clinical condition (no direct removal of CK by the adsorber!)
- Contraindication for intensified fluid therapy

## **Timing**

- Ideally start within the first 24 hrs. after diagnosis/onset of severe rhabdomyolysis
- In general start early before irreversible damage occurs

## **Dosing**

 Consider changing adsorber after 8 hours until sufficient stabilization/clinical improvement has occurred or myoglobin levels well below 5000 µg/l have been reached.

