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Usefulness of Midregional pro-adrenomedullin as a marker of organ damage and predictor of mortality in patients with sepsis

Enrique Bernal-Morell(1)(3), Eva García-Villalba(1), Maricarmen Vera (1), Blanca Medina (1), Monica Martinez (1), Victoria Callejo (1), Salvador Valero (1), Cesar Cinesi (2)(3), Pascual Piñera (2), Antonia Alcaraz (1), Irene Marin (1)(3), Angeles Muñoz (1), Alfredo Cano (1)

(1) Infecctious Disease Unit. Reina Sofia Hospital. Murcia
(2) Emergency Department Unit. Reina Sofia Hospital. Murcia
(3) Catholic University of Murcia

Corresponding author
Enrique Bernal Morell
Infectious Disease Unit
Reina Sofia Hospital.
Avda. Intendente Jorge Palacios, 1
CP 30003. Murcia
Email: ebm.hgurs@gmail.com

All authors contributed equally to this work

Highlights

- MR-proADM was the best biomarker to predict sepsis as defined by the Sepsis-3 criteria in hospitalized patients from Internal Medicine Service
- The cut-off point of MR-proADM of 1.8 nmol/L was the one that had greater discriminative capacity to predict 90 days mortalitily
- The addition of MR-proADM to SOFA score increased the ability of SOFA to identify high risk patients

Abstract

Background: Midregional proadrenomedullin (MR-proADM) is a prognostic biomarker in patients with community-acquired pneumonia (CAP) and sepsis. In this paper, we examined the ability of MR-proADM to predict organ damage and long-term