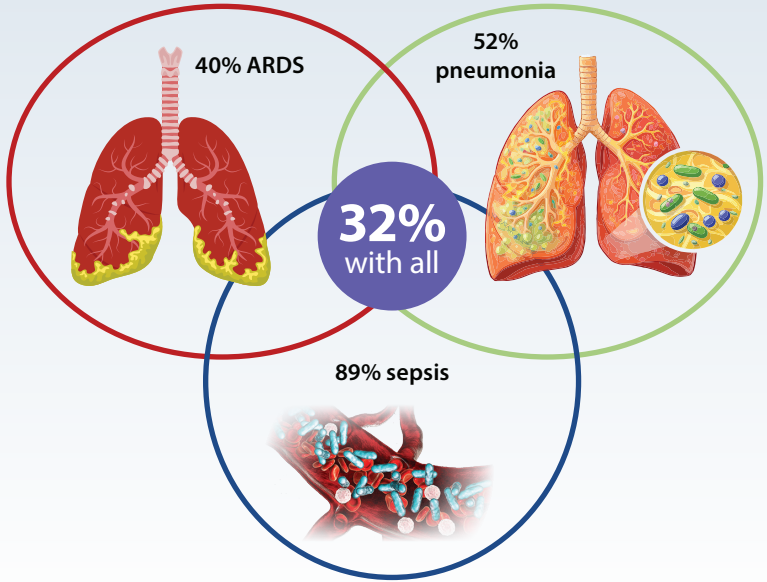
Using a National Platform to Better Phenotype ARDS, Pneumonia, and Sepsis (APS): The APS Consortium

STUDY DESIGN

- Multicenter, longitudinal, prospective, observational cohort study
- Enrolled 1,000 of goal of 4,000 critically ill adults with ARDS, pneumonia, sepsis, or a combination thereof
- Biospecimen, imaging, and laboratory results banked to assess plasma and respiratory biomarkers, host response, systemic and respiratory immune response, respiratory and gastrointestinal microbiomes, and pathogen and microbiota

RESULTS



High illness severity

- 75% vasopressor use
- 50% invasive mechanical ventilation
- 25% in-hospital mortality

High biospecimen collection rates

- 99% with blood samples
- 98% with upper respiratory swabs
- 37% with lower respiratory samples
- 80% with urine samples
- 65% with gastrointestinal sample

This study suggests that using a multicenter platform to prospectively collect data and biospecimens on patients with 3 distinct but often overlapping diseases is feasible and may lead to a greater ability to phenotype these syndromes.

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