

6S Trial

HYDROXYETHYL STARCH 130/0.42 VERSUS RINGER'S ACETATE IN SEVERE SEPSIS

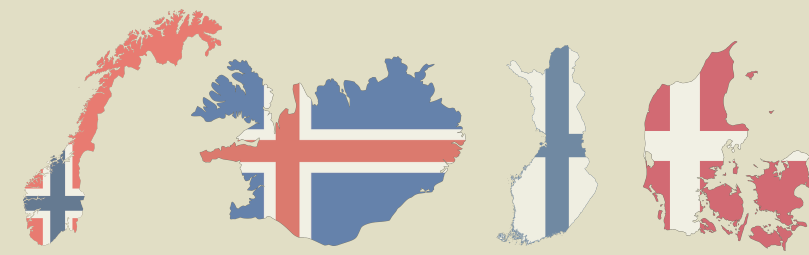
What is the safety and efficacy of 6% HES (130/0.4) as compared with 0.9% saline alone for fluid resuscitation in patients with severe sepsis?

26 ICUs

6% HES

130 kD/0.4

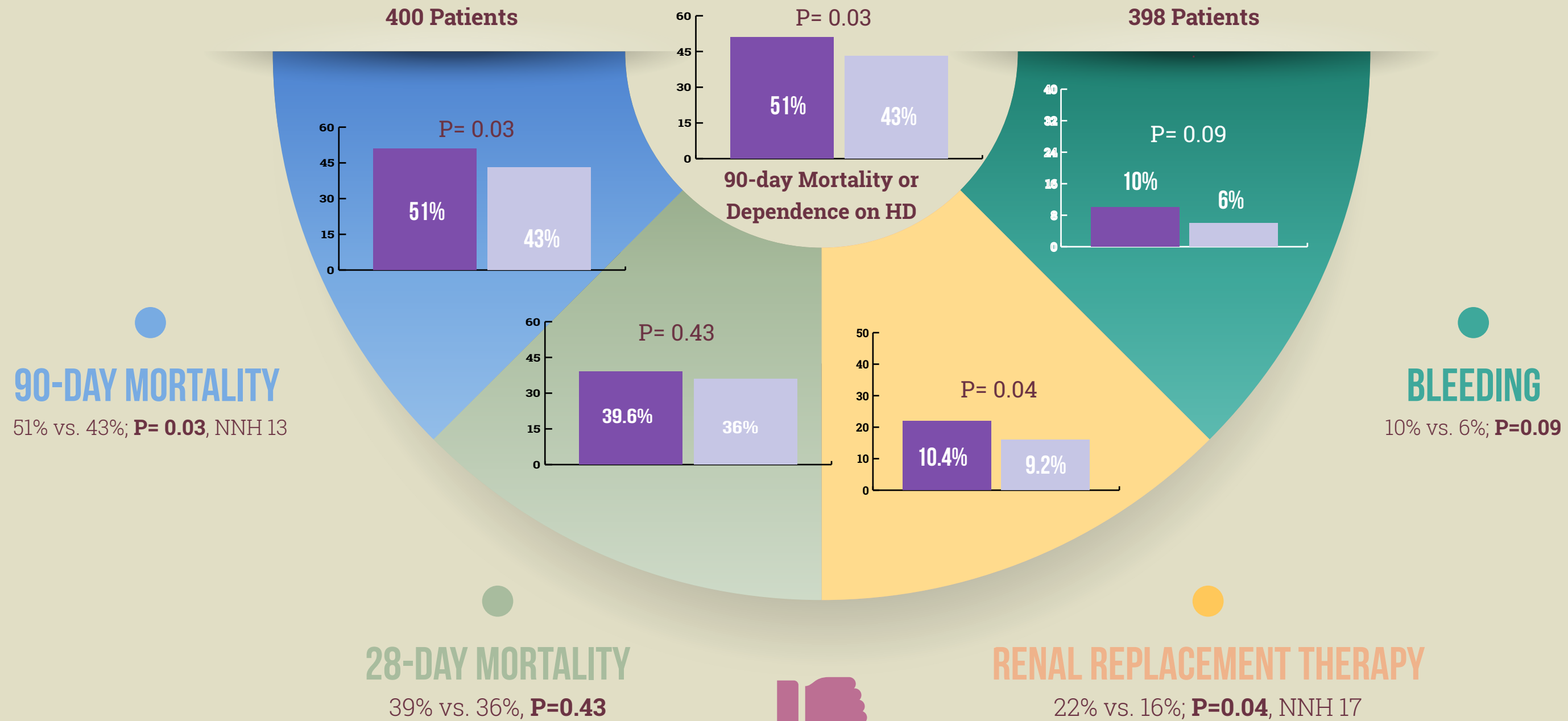
400 Patients



SALINE

0.9% Sodium Chloride

398 Patients



90-DAY MORTALITY

51% vs. 43%; **P= 0.03**, NNH 13

28-DAY MORTALITY

39% vs. 36%, **P=0.43**

RENAL REPLACEMENT THERAPY

22% vs. 16%; **P=0.04**, NNH 17

BLEEDING

10% vs. 6%; **P=0.09**

Fluid resuscitation with HES 130/0.42 in patients with severe sepsis is associated with an increased risk of death at day 90 and higher likelihood to require renal-replacement therapy, as compared to those receiving Ringer's acetate.

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