

For Serious Infections with MDR Gram –ve Bacteria

Polyang B

(Polymyxin B 7.5 MIU Inj)



Only effective antibiotic against MDR organisms, particularly Carbapenem resistant Enterobacteriaceae*

Useful in treating infections of Urinary tract, meninges and blood stream caused by Pseudomonas, Acinetobacter and Enterobacteriaceae

Achieves adequate drug levels more rapidly and reliably than Colistin

Lower rate of nephrotoxicity than Colistin

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Objectives#: To study the efficacy of polymyxin B (**Polyang B**) hemoperfusion in addition to standard care for sepsis treatment.

Materials and methods: Fifty sepsis patients (mean age 54.26 ± 14.64 years; 68% males) were randomized to either the case group (n = 25; receiving Polymyxin B hemoperfusion in addition to standard ICU care) or the control group (n = 25; receiving standard ICU care only). The patients were followed up at frequent intervals of 6, 12, 24, 48, and 72 hours. A last follow-up on day 7 was done. The duration of the ICU stay and survival until day 7 were recorded. Changes in clinical and biochemical parameters were also noted and compared.

Results: Mean sequential organ failure assessment (SOFA) scores at admission were 3.44 ± 1.00 and 2.80 ± 0.82 , respectively, in cases and controls. Cases as compared to controls showed faster, and sustainable improvement. Polymyxin B (**Polyang B**) use also seemed to have a protective effect against a fall in platelet count in the patients.

Conclusion: Addition of polymyxin B (**Polyang B**) hemoperfusion helped to improve the clinical course, particularly restoration of organ function, and outcomes in ICU admitted sepsis patients.

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For Use of a Registered Medical Practitioner only | ANG/PMT/05/11/2025/LB/Polyang

Preferred Polymyxin for systemic Invasive Infections

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(More than a decade of Trust)

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