WEBVTT

NOTE duration:"00:23:48.3520000"

NOTE language:en-us

NOTE Confidence: 0.896725594997406

00:00:00.000 --> 00:00:02.844 Uhm, I know a lot of you guys already,

NOTE Confidence: 0.896725594997406

 $00:00:02.850 \longrightarrow 00:00:04.596$ but I'm one of the clinical

NOTE Confidence: 0.896725594997406

 $00{:}00{:}04.596 \dashrightarrow 00{:}00{:}06.600$ hematologist here at the Cancer Center,

NOTE Confidence: 0.896725594997406

 $00{:}00{:}06{.}600 \dashrightarrow 00{:}00{:}08{.}680$ and for the last nine years my main

NOTE Confidence: 0.896725594997406

 $00{:}00{:}08.680 \dashrightarrow 00{:}00{:}10.376$ interest have been medical education

NOTE Confidence: 0.896725594997406

 $00:00:10.376 \rightarrow 00:00:12.236$ and thrombosis or blood clotting.

NOTE Confidence: 0.896725594997406

 $00{:}00{:}12.240 \dashrightarrow 00{:}00{:}14.520$ And then in mid March of this year

NOTE Confidence: 0.896725594997406

 $00:00:14.520 \rightarrow 00:00:16.555$ Is everybody knows kovid hit and so NOTE Confidence: 0.896725594997406

00:00:16.555 --> 00:00:18.763 early on when the first kovid patient NOTE Confidence: 0.896725594997406

00:00:18.763 --> 00:00:20.995 arrived at Yale New Haven Hospital.

NOTE Confidence: 0.896725594997406

00:00:21.000 -> 00:00:22.918 A few of us in the hematology

NOTE Confidence: 0.896725594997406

 $00{:}00{:}22.918 \dashrightarrow 00{:}00{:}25.033$ section were asked to join a multi

NOTE Confidence: 0.896725594997406

 $00:00:25.033 \rightarrow 00:00:26.573$ disciplinary effort designed to try

NOTE Confidence: 0.896725594997406

 $00:00:26.573 \rightarrow 00:00:28.829$ to understand in combat the disease,

 $00:00:28.830 \rightarrow 00:00:31.656$ an one of the more interesting and kind of.

NOTE Confidence: 0.896725594997406

00:00:31.660 --> 00:00:33.096 Unexpected features of COVID-19

NOTE Confidence: 0.896725594997406

 $00:00:33.096 \dashrightarrow 00:00:34.891$ infection was that there's actually

NOTE Confidence: 0.896725594997406

 $00:00:34.891 \rightarrow 00:00:37.030$ a huge component of blood clotting,

NOTE Confidence: 0.896725594997406

 $00:00:37.030 \rightarrow 00:00:39.172$ and this is something that's term

NOTE Confidence: 0.896725594997406

00:00:39.172 --> 00:00:40.243 COVID-19 associated Coagulopathy.

NOTE Confidence: 0.896725594997406

 $00:00:40.250 \rightarrow 00:00:42.840$ So we became interested in the hematology

NOTE Confidence: 0.896725594997406

 $00:00:42.840 \rightarrow 00:00:45.365$ section and trying to not just manage

NOTE Confidence: 0.896725594997406

00:00:45.365 --> 00:00:47.045 this but also understand this,

NOTE Confidence: 0.896725594997406

 $00:00:47.050 \rightarrow 00:00:50.394$ and so that's what I'm going to be

NOTE Confidence: 0.896725594997406

00:00:50.394 --> 00:00:53.108 talking with you all about today.

NOTE Confidence: 0.896725594997406

 $00:00:53.110 \longrightarrow 00:00:53.672$ So again,

NOTE Confidence: 0.896725594997406

 $00{:}00{:}53.672 \dashrightarrow 00{:}00{:}55.358$ this this whole feature of blood

NOTE Confidence: 0.896725594997406

 $00{:}00{:}55{.}358 \dashrightarrow 00{:}00{:}57{.}608$ clotting in Kobe 19 infection is

NOTE Confidence: 0.896725594997406

00:00:57.608 --> 00:00:59.236 something that's called COVID-19

00:00:59.236 --> 00:01:00.050 associated Coagulopathy.

NOTE Confidence: 0.896725594997406

 $00:01:00.050 \rightarrow 00:01:02.633$ Its abbreviated CAC and at the laboratory

NOTE Confidence: 0.896725594997406

 $00:01:02.633 \longrightarrow 00:01:04.907$ level it's defined by 4 basic things.

NOTE Confidence: 0.896725594997406

 $00:01:04.910 \longrightarrow 00:01:06.908$ So one is that these patients

NOTE Confidence: 0.896725594997406

 $00{:}01{:}06{.}908 \dashrightarrow 00{:}01{:}08{.}730$ have an elevated D dimer.

NOTE Confidence: 0.896725594997406

 $00:01:08.730 \longrightarrow 00:01:10.460$ That's often very, very high.

NOTE Confidence: 0.896725594997406

 $00:01:10.460 \longrightarrow 00:01:12.542$ The second is that they have

NOTE Confidence: 0.896725594997406

 $00:01:12.542 \longrightarrow 00:01:13.930$ a high fibrinogen level.

NOTE Confidence: 0.896725594997406

00:01:13.930 --> 00:01:15.670 Again, that's often very high.

NOTE Confidence: 0.896725594997406

 $00:01:15.670 \dashrightarrow 00:01:18.022$ The third is that many of these patients

NOTE Confidence: 0.896725594997406

 $00{:}01{:}18.022 \dashrightarrow 00{:}01{:}20.180$ have a normal prothrombin time,

NOTE Confidence: 0.896725594997406

 $00:01:20.180 \rightarrow 00:01:22.256$ or very slightly elevated prothrombin time,

NOTE Confidence: 0.896725594997406

 $00:01:22.260 \longrightarrow 00:01:23.232$ and the 4th.

NOTE Confidence: 0.896725594997406

 $00{:}01{:}23.232 \dashrightarrow 00{:}01{:}25.500$ Is that most of them have normal

NOTE Confidence: 0.896725594997406

 $00:01:25.576 \longrightarrow 00:01:26.730$ platelet counts,

NOTE Confidence: 0.896725594997406

 $00:01:26.730 \longrightarrow 00:01:29.278$ although some of them do have a

- NOTE Confidence: 0.896725594997406
- $00:01:29.278 \rightarrow 00:01:30.820$ slightly reduced platelet count.
- NOTE Confidence: 0.896725594997406
- 00:01:30.820 --> 00:01:33.046 And again, as I mentioned before,
- NOTE Confidence: 0.896725594997406
- $00:01:33.050 \longrightarrow 00:01:34.538$ clinically the main feature
- NOTE Confidence: 0.896725594997406
- $00{:}01{:}34{.}538 \dashrightarrow 00{:}01{:}36{.}398$ associated with code 19 associated
- NOTE Confidence: 0.896725594997406
- $00{:}01{:}36{.}398 \dashrightarrow 00{:}01{:}37{.}519$ Coagulopathy is throm bosis.
- NOTE Confidence: 0.896725594997406
- $00:01:37.520 \rightarrow 00:01:40.026$ So these patients have a very high
- NOTE Confidence: 0.896725594997406
- 00:01:40.026 --> 00:01:41.979 risk of developing blood clots,
- NOTE Confidence: 0.896725594997406
- 00:01:41.980 --> 00:01:43.840 predominantly venous thromboembolism or VTE,
- NOTE Confidence: 0.896725594997406
- $00{:}01{:}43.840 \dashrightarrow 00{:}01{:}45.700$ and in particular pulmonary embolism.
- NOTE Confidence: 0.896725594997406
- $00:01:45.700 \dashrightarrow 00:01:47.860$ There are some single institution
- NOTE Confidence: 0.896725594997406
- $00:01:47.860 \longrightarrow 00:01:50.568$ studies that suggest that up to 37
- NOTE Confidence: 0.896725594997406
- 00:01:50.568 --> 00:01:52.420 to even 40% of COVID-19 patients
- NOTE Confidence: 0.896725594997406
- $00{:}01{:}52{.}420 \dashrightarrow 00{:}01{:}54{.}320$ in an intensive care unit.
- NOTE Confidence: 0.896725594997406
- $00{:}01{:}54{.}320 \dashrightarrow 00{:}01{:}56{.}475$ Who are ready on prophylactic
- NOTE Confidence: 0.896725594997406
- $00:01:56.475 \rightarrow 00:01:58.630$ anticoagulation will develop a pulmonary
- NOTE Confidence: 0.896725594997406

 $00:01:58.701 \dashrightarrow 00:02:00.855$ embolism or a deep vein thrombosis.

NOTE Confidence: 0.896725594997406

 $00{:}02{:}00{.}860 \dashrightarrow 00{:}02{:}03{.}692$ And In addition Artur throm bosis an

NOTE Confidence: 0.896725594997406

 $00{:}02{:}03.692 \dashrightarrow 00{:}02{:}05.580$ then microvascular throm bosis on

NOTE Confidence: 0.896725594997406

 $00:02:05.650 \rightarrow 00:02:08.010$ autopsies has also been described.

NOTE Confidence: 0.896725594997406

 $00:02:08.010 \rightarrow 00:02:10.278$ So because of this very high rate

NOTE Confidence: 0.896725594997406

 $00:02:10.278 \dashrightarrow 00:02:12.330$ of thrombosis are hospital system,

NOTE Confidence: 0.896725594997406

 $00{:}02{:}12.330 \dashrightarrow 00{:}02{:}13.805$ our institution was actually one

NOTE Confidence: 0.896725594997406

 $00:02:13.805 \longrightarrow 00:02:16.137$ of the first in the country to

NOTE Confidence: 0.896725594997406

00:02:16.137 --> 00:02:18.519 develop what we call an escalated

NOTE Confidence: 0.896725594997406

 $00:02:18.519 \rightarrow 00:02:19.890$ intensity anticoagulation regiment.

NOTE Confidence: 0.896725594997406

 $00{:}02{:}19.890 \dashrightarrow 00{:}02{:}22.698$ So what I mean by this is that as

NOTE Confidence: 0.896725594997406

 $00:02:22.698 \rightarrow 00:02:25.649 \text{ most of you who are clinicians know,}$

NOTE Confidence: 0.896725594997406

 $00:02:25.650 \longrightarrow 00:02:27.435$ whenever patients in general get

NOTE Confidence: 0.896725594997406

 $00:02:27.435 \dashrightarrow 00:02:29.610$ admitted to the hospital already there,

NOTE Confidence: 0.896725594997406

00:02:29.610 --> 00:02:31.710 blood clotting risk goes up and

NOTE Confidence: 0.896725594997406

 $00:02:31.710 \dashrightarrow 00:02:33.842$ so most patients admitted to a

- NOTE Confidence: 0.896725594997406
- $00:02:33.842 \longrightarrow 00:02:35.170$ hospital center including Smilow
- NOTE Confidence: 0.896725594997406
- $00{:}02{:}35{.}170 \dashrightarrow 00{:}02{:}38{.}522$ would be on what we call a low dose
- NOTE Confidence: 0.896725594997406
- 00:02:38.522 --> 00:02:39.698 of prophylactic anticoagulation.
- NOTE Confidence: 0.896725594997406
- 00:02:39.700 --> 00:02:40.047 Typically,
- NOTE Confidence: 0.896725594997406
- $00{:}02{:}40.047 \dashrightarrow 00{:}02{:}42.129$ enoxaparin had a dose of 40
- NOTE Confidence: 0.896725594997406
- $00:02:42.129 \longrightarrow 00:02:43.490$ milligrams once a day.
- NOTE Confidence: 0.896725594997406
- $00:02:43.490 \longrightarrow 00:02:44.826$ But in kovid patients,
- NOTE Confidence: 0.896725594997406
- $00:02:44.826 \longrightarrow 00:02:46.830$ because of this increase risk of
- NOTE Confidence: 0.896725594997406
- $00:02:46.897 \dashrightarrow 00:02:49.597$ Trumbo Sis we adopted this escalated
- NOTE Confidence: 0.896725594997406
- 00:02:49.597 --> 00:02:50.947 intensity anticoagulation regiment
- NOTE Confidence: 0.896725594997406
- $00:02:50.947 \rightarrow 00:02:52.920$ so that patients with Cove in
- NOTE Confidence: 0.896725594997406
- $00{:}02{:}52{.}920 \dashrightarrow 00{:}02{:}55{.}016$ infection who had a D dimer level
- NOTE Confidence: 0.896725594997406
- $00{:}02{:}55{.}016 \dashrightarrow 00{:}02{:}57{.}242$ that was above a certain cut off
- NOTE Confidence: 0.896725594997406
- $00{:}02{:}57{.}242 \dashrightarrow 00{:}02{:}59{.}569$ which we ended up choosing us 5
- NOTE Confidence: 0.896725594997406
- 00:02:59.569 --> 00:03:00.865 milligram per liter would
- NOTE Confidence: 0.888363063335419

00:03:00.935 --> 00:03:02.787 automatically get a higher

NOTE Confidence: 0.888363063335419

 $00{:}03{:}02{.}787 \dashrightarrow 00{:}03{:}04{.}176$ dose of anticoagulation.

NOTE Confidence: 0.888363063335419

 $00{:}03{:}04.180 \dashrightarrow 00{:}03{:}05.990$ We would call this intermediate

NOTE Confidence: 0.888363063335419

 $00:03:05.990 \rightarrow 00:03:06.714$ enoxaparin typically,

NOTE Confidence: 0.888363063335419

 $00:03:06.720 \longrightarrow 00:03:09.608$ which is at a dose of 0.5 milligrams

NOTE Confidence: 0.888363063335419

 $00{:}03{:}09{.}608 \dashrightarrow 00{:}03{:}12{.}177$ per kilogram twice a day and then

NOTE Confidence: 0.888363063335419

 $00:03:12.177 \rightarrow 00:03:14.390$ again because of this super high.

NOTE Confidence: 0.888363063335419

00:03:14.390 -> 00:03:16.196 Risk of thrombosis in any covert

NOTE Confidence: 0.888363063335419

 $00:03:16.196 \rightarrow 00:03:18.821$ patient in whom there is a suspicion for

NOTE Confidence: 0.888363063335419

 $00{:}03{:}18.821 \dashrightarrow 00{:}03{:}20.521$ venous thrombotic event or confirmed

NOTE Confidence: 0.888363063335419

 $00{:}03{:}20{.}521 \dashrightarrow 00{:}03{:}22{.}872$ Venus Don Bolic event we would

NOTE Confidence: 0.888363063335419

 $00:03:22.872 \rightarrow 00:03:24.432$ recommend full dose anticoagulation

NOTE Confidence: 0.888363063335419

 $00:03:24.432 \rightarrow 00:03:26.009$ typically again with enoxaparin

NOTE Confidence: 0.888363063335419

00:03:26.009 --> 00:03:28.367 editors of 1 milligram per kilogram

NOTE Confidence: 0.888363063335419

 $00:03:28.367 \dashrightarrow 00:03:30.398$ twice daily so as I mentioned we

NOTE Confidence: 0.888363063335419

 $00{:}03{:}30{.}398 \dashrightarrow 00{:}03{:}32{.}275$ were one of the first hospital

- NOTE Confidence: 0.888363063335419
- $00:03:32.275 \rightarrow 00:03:34.567$ centers in the country to develop.
- NOTE Confidence: 0.888363063335419
- $00{:}03{:}34{.}570 \dashrightarrow 00{:}03{:}36{.}500$ One of these escalated escalated
- NOTE Confidence: 0.888363063335419
- $00:03:36.500 \rightarrow 00:03:37.658$ anticoagulation dosing guidelines
- NOTE Confidence: 0.888363063335419
- $00:03:37.658 \dashrightarrow 00:03:40.022$ and many other hospitals if not most
- NOTE Confidence: 0.888363063335419
- $00:03:40.022 \rightarrow 00:03:41.880$ around the country have followed suit.
- NOTE Confidence: 0.888363063335419
- $00:03:41.880 \longrightarrow 00:03:43.650$ One of the challenges that
- NOTE Confidence: 0.888363063335419
- $00:03:43.650 \longrightarrow 00:03:45.420$ we've all had his clinicians.
- NOTE Confidence: 0.888363063335419
- $00:03:45.420 \longrightarrow 00:03:46.820$ Is that even though most of us
- NOTE Confidence: 0.888363063335419
- $00:03:46.820 \longrightarrow 00:03:48.629$ in the country are doing these
- NOTE Confidence: 0.888363063335419
- $00:03:48.629 \rightarrow 00:03:49.787$ escalated anticoagulation regiments,
- NOTE Confidence: 0.888363063335419
- 00:03:49.790 00:03:51.708 we don't actually know if they're safe
- NOTE Confidence: 0.888363063335419
- $00{:}03{:}51.708 \dashrightarrow 00{:}03{:}53.828$ or if there even affective and so at
- NOTE Confidence: 0.888363063335419
- $00:03:53.828 \rightarrow 00:03:55.977$ yell our group is in the process of
- NOTE Confidence: 0.888363063335419
- $00{:}03{:}55{.}977 \dashrightarrow 00{:}03{:}57{.}972$ analyzing this now as are many others
- NOTE Confidence: 0.888363063335419
- $00:03:57.980 \dashrightarrow 00:03:59.756$ and there are some clinical trials
- NOTE Confidence: 0.888363063335419

 $00:03:59.756 \dashrightarrow 00:04:01.225$ around different institutions in the

NOTE Confidence: 0.888363063335419

 $00{:}04{:}01{.}225 \dashrightarrow 00{:}04{:}02{.}884$ country that are looking at this issue.

NOTE Confidence: 0.888363063335419

 $00:04:02.890 \longrightarrow 00:04:05.530$ This question as well.

NOTE Confidence: 0.888363063335419

 $00:04:05.530 \longrightarrow 00:04:07.371$ So one of the early studies that

NOTE Confidence: 0.888363063335419

 $00{:}04{:}07{.}371 \dashrightarrow 00{:}04{:}09{.}465$ came out from China on covert

NOTE Confidence: 0.888363063335419

 $00:04:09.465 \longrightarrow 00:04:11.117$ associated Coagulopathy reported that

NOTE Confidence: 0.888363063335419

 $00{:}04{:}11{.}117 \dashrightarrow 00{:}04{:}13{.}990$ it was essentially a variation of

NOTE Confidence: 0.888363063335419

00:04:13.990 --> 00:04:15.565 disseminated intravascular coagulations,

NOTE Confidence: 0.888363063335419

00:04:15.570 --> 00:04:16.128 or DIC,

NOTE Confidence: 0.888363063335419

 $00{:}04{:}16.128 \dashrightarrow 00{:}04{:}18.806$ which as most of you all know as sort

NOTE Confidence: 0.888363063335419

 $00{:}04{:}18.806 \dashrightarrow 00{:}04{:}21.438$ of an end point of a coagulopathic

NOTE Confidence: 0.888363063335419

 $00:04:21.438 \longrightarrow 00:04:23.243$ picture that's characterized by

NOTE Confidence: 0.888363063335419

 $00{:}04{:}23.243 \dashrightarrow 00{:}04{:}25.683$ pretty high rates of thrombosis

NOTE Confidence: 0.888363063335419

 $00:04:25.683 \longrightarrow 00:04:27.147$ and terminal disease.

NOTE Confidence: 0.888363063335419

00:04:27.150 --> 00:04:29.412 But DIC itself again as a

NOTE Confidence: 0.888363063335419

 $00:04:29.412 \longrightarrow 00:04:31.390$ lot of other clinicians know,

00:04:31.390 --> 00:04:33.706 has a very characteristic laboratory pattern,

NOTE Confidence: 0.888363063335419

 $00:04:33.710 \longrightarrow 00:04:36.405$ and to us it really didn't seem.

NOTE Confidence: 0.888363063335419

00:04:36.410 --> 00:04:38.314 White covered associated Coagulopathy

NOTE Confidence: 0.888363063335419

 $00:04:38.314 \rightarrow 00:04:41.170$ was similar to DIC at all.

NOTE Confidence: 0.888363063335419

 $00:04:41.170 \longrightarrow 00:04:43.634$ So early on when we start first started

NOTE Confidence: 0.888363063335419

 $00:04:43.634 \rightarrow 00:04:45.800$ seeing kovid patients in our hospital,

NOTE Confidence: 0.888363063335419

 $00:04:45.800 \dashrightarrow 00:04:47.864$ we decided to do a couple of studies

NOTE Confidence: 0.888363063335419

 $00:04:47.864 \longrightarrow 00:04:50.101$ to try to understand what the

NOTE Confidence: 0.888363063335419

 $00{:}04{:}50{.}101 \dashrightarrow 00{:}04{:}51{.}753$ code associated Coagulopathy is.

NOTE Confidence: 0.888363063335419

 $00:04:51.760 \rightarrow 00:04:53.992$ And so this first study that we did

NOTE Confidence: 0.888363063335419

 $00:04:53.992 \longrightarrow 00:04:56.872$ was led by one of our star first

NOTE Confidence: 0.888363063335419

00:04:56.872 --> 00:04:58.376 Hematology Fellows George Joshua,

NOTE Confidence: 0.888363063335419

 $00:04:58.380 \longrightarrow 00:05:00.963$ and what we did here was to look at NOTE Confidence: 0.888363063335419

00:05:00.963 - > 00:05:03.676 the 1st 200 plus patients with Kobe,

NOTE Confidence: 0.888363063335419

 $00:05:03.680 \dashrightarrow 00:05:05.815$ who are admitted to our hospital and NOTE Confidence: 0.888363063335419

 $00{:}05{:}05{.}815 \dashrightarrow 00{:}05{:}07{.}755$ we calculated what's called a dic

NOTE Confidence: 0.888363063335419

 $00:05:07.755 \rightarrow 00:05:09.681$ score at specified by the International

NOTE Confidence: 0.888363063335419

 $00:05:09.681 \rightarrow 00:05:11.620$ Society of thrombosis and hemostasis,

NOTE Confidence: 0.888363063335419

 $00:05:11.620 \longrightarrow 00:05:12.337$ or IST age.

NOTE Confidence: 0.888363063335419

 $00:05:12.337 \dashrightarrow 00:05:14.448$ And so the way this works is that

NOTE Confidence: 0.888363063335419

 $00:05:14.448 \longrightarrow 00:05:16.704$ the ice TH score essentially looks NOTE Confidence: 0.888363063335419

 $00:05:16.704 \longrightarrow 00:05:18.667$ at different laboratory features of

NOTE Confidence: 0.888363063335419

00:05:18.667 --> 00:05:20.587 patients suspected of having DIC,

NOTE Confidence: 0.888363063335419

 $00{:}05{:}20.590 \dashrightarrow 00{:}05{:}22.760$ and then it spits out a score.

NOTE Confidence: 0.888363063335419

 $00:05:22.760 \dashrightarrow 00:05:25.248$ And if your score is in the range

NOTE Confidence: 0.888363063335419

 $00:05:25.248 \longrightarrow 00:05:26.479$ of five and up,

NOTE Confidence: 0.888363063335419

 $00:05:26.480 \rightarrow 00:05:28.070$ then that's considered overt DIC

NOTE Confidence: 0.888363063335419

 $00{:}05{:}28.070 \dashrightarrow 00{:}05{:}30.002$ in anything less than five is

NOTE Confidence: 0.888363063335419

 $00:05:30.002 \rightarrow 00:05:31.437$ not consistent with over DSD.

NOTE Confidence: 0.888363063335419

 $00:05:31.440 \dashrightarrow 00:05:33.680$ And so in our first couple 100 patients

NOTE Confidence: 0.888363063335419

 $00:05:33.680 \rightarrow 00:05:35.777$ with Cobain infection admitted to Yale,

- NOTE Confidence: 0.888363063335419
- 00:05:35.780 --> 00:05:37.330 New Haven Hospital when we

00:05:37.330 --> 00:05:38.880 calculated the IST FDIC scores,

NOTE Confidence: 0.888363063335419

 $00:05:38.880 \longrightarrow 00:05:41.127$ whether we were looking at patients who

NOTE Confidence: 0.888363063335419

 $00:05:41.127 \rightarrow 00:05:43.220$ survived or patients who did not survive.

NOTE Confidence: 0.888363063335419

00:05:43.220 --> 00:05:44.404 As you can see,

NOTE Confidence: 0.888363063335419

 $00{:}05{:}44{.}404 \dashrightarrow 00{:}05{:}46{.}562$ almost all patients had a very low

NOTE Confidence: 0.888363063335419

 $00:05:46.562 \dashrightarrow 00:05:48.760$ IST HDC score in this entire group.

NOTE Confidence: 0.888363063335419

00:05:48.760 -> 00:05:50.422 There was only one patient who

NOTE Confidence: 0.888363063335419

 $00{:}05{:}50{.}422 \dashrightarrow 00{:}05{:}51{.}530$ had an IST HD

NOTE Confidence: 0.877944767475128

 $00:05:51.601 \rightarrow 00:05:53.995$ score of six consistent with over DIC,

NOTE Confidence: 0.877944767475128

00:05:54.000 --> 00:05:55.946 but this is a patient who had

NOTE Confidence: 0.877944767475128

 $00:05:55.946 \dashrightarrow 00:05:57.390$ helped syndrome after pregnancy,

NOTE Confidence: 0.877944767475128

 $00{:}05{:}57{.}390 \dashrightarrow 00{:}05{:}59{.}581$ and we didn't think that this is

NOTE Confidence: 0.877944767475128

 $00{:}05{:}59{.}581 \dashrightarrow 00{:}06{:}02{.}059$ related at all to COVID-19 infection.

NOTE Confidence: 0.877944767475128

 $00:06:02.060 \longrightarrow 00:06:03.244$ So based on this,

 $00:06:03.244 \rightarrow 00:06:05.020$ we really started to feel that

NOTE Confidence: 0.877944767475128

 $00:06:05.087 \rightarrow 00:06:06.428$ kovid associated Coagulopathy

NOTE Confidence: 0.877944767475128

 $00:06:06.428 \rightarrow 00:06:08.663$ was not consistent with DIC,

NOTE Confidence: 0.877944767475128

 $00:06:08.670 \longrightarrow 00:06:11.206$ and so the next thing that we did

NOTE Confidence: 0.877944767475128

 $00:06:11.206 \rightarrow 00:06:13.472$ was to perform a somewhat large

NOTE Confidence: 0.877944767475128

 $00:06:13.472 \longrightarrow 00:06:16.269$ study of a number of ICU and

NOTE Confidence: 0.877944767475128

00:06:16.269 --> 00:06:18.579 non ICU patients with Cove it,

NOTE Confidence: 0.877944767475128

 $00:06:18.580 \rightarrow 00:06:21.452$ in which we measured lots and lots of

NOTE Confidence: 0.877944767475128

 $00:06:21.452 \rightarrow 00:06:22.930$ different coagulations factors trying

NOTE Confidence: 0.877944767475128

 $00:06:22.930 \dashrightarrow 00:06:25.359$ to see what exactly the mechanism of

NOTE Confidence: 0.877944767475128

 $00{:}06{:}25{.}359 \dashrightarrow 00{:}06{:}27{.}747$ covert Coagulopathy might be an weather.

NOTE Confidence: 0.877944767475128

 $00:06:27.750 \longrightarrow 00:06:30.498$ Again this was distinct from DC.

NOTE Confidence: 0.877944767475128

 $00{:}06{:}30{.}500 \dashrightarrow 00{:}06{:}32{.}258$ So this work here was carried

NOTE Confidence: 0.877944767475128

 $00:06:32.258 \rightarrow 00:06:34.317$ out by four people who are shown

NOTE Confidence: 0.877944767475128

 $00:06:34.317 \longrightarrow 00:06:35.949$ at the bottom of the page.

NOTE Confidence: 0.877944767475128

 $00:06:35.950 \rightarrow 00:06:36.227$ Parveen,

- NOTE Confidence: 0.877944767475128
- $00{:}06{:}36{.}227 \dashrightarrow 00{:}06{:}38{.}166$ but hell is one of the lab
- NOTE Confidence: 0.877944767475128
- $00{:}06{:}38.166 \dashrightarrow 00{:}06{:}39.735$ technicians in the Park Street Lab
- NOTE Confidence: 0.877944767475128
- 00:06:39.735 > 00:06:41.560 who did all of the quag elation
- NOTE Confidence: 0.877944767475128
- $00:06:41.560 \rightarrow 00:06:43.225$ testing and then George Joshua
- NOTE Confidence: 0.877944767475128
- 00:06:43.225 --> 00:06:45.176 refers to your fellow Alex Pine,
- NOTE Confidence: 0.877944767475128
- $00{:}06{:}45{.}176 \dashrightarrow 00{:}06{:}47{.}332$ one of our star senior 30 or
- NOTE Confidence: 0.877944767475128
- $00:06:47.332 \longrightarrow 00:06:49.364$ Fellows in he monk and then a
- NOTE Confidence: 0.877944767475128
- 00:06:49.364 --> 00:06:51.622 super MD PhD student at my slash
- NOTE Confidence: 0.877944767475128
- $00:06:51.622 \dashrightarrow 00:06:53.427$ also together did this analysis.
- NOTE Confidence: 0.877944767475128
- $00:06:53.430 \longrightarrow 00:06:55.296$ So first I'll starting at the
- NOTE Confidence: 0.877944767475128
- $00:06:55.296 \longrightarrow 00:06:56.540$ top of the page.
- NOTE Confidence: 0.877944767475128
- $00{:}06{:}56{.}540 \dashrightarrow 00{:}06{:}58{.}780$ The first thing we measured were D dimer
- NOTE Confidence: 0.877944767475128
- $00:06:58.780 \dashrightarrow 00:07:01.207$ levels and something else called a thrombin,
- NOTE Confidence: 0.877944767475128
- $00{:}07{:}01{.}210 \dashrightarrow 00{:}07{:}02{.}454$ antithrombin complex or TI-80.
- NOTE Confidence: 0.877944767475128
- $00:07:02.454 \rightarrow 00:07:04.320$ So as most of you know,
- NOTE Confidence: 0.877944767475128

 $00:07:04.320 \dashrightarrow 00:07:06.656$ the D dimer level is something that tends

NOTE Confidence: 0.877944767475128

 $00{:}07{:}06.656 \dashrightarrow 00{:}07{:}09.288$ to go up on patients form blood clots,

NOTE Confidence: 0.877944767475128

 $00{:}07{:}09{.}290 \dashrightarrow 00{:}07{:}11{.}201$ and it can often be a very

NOTE Confidence: 0.877944767475128

00:07:11.201 -> 00:07:13.019 useful measure of blood clotting,

NOTE Confidence: 0.877944767475128

 $00{:}07{:}13.020 \dashrightarrow 00{:}07{:}15.001$ and one of the significant features of

NOTE Confidence: 0.877944767475128

 $00:07:15.001 \dashrightarrow 00:07:17.380$ the D dimer is that encoded infection.

NOTE Confidence: 0.877944767475128

 $00{:}07{:}17.380 \dashrightarrow 00{:}07{:}19.018$ the D dimer level seems to be

NOTE Confidence: 0.877944767475128

 $00:07:19.018 \dashrightarrow 00:07:20.984$ one of the very very prominent

NOTE Confidence: 0.877944767475128

 $00:07:20.984 \dashrightarrow 00:07:22.979$ markers of mortality and overall

NOTE Confidence: 0.877944767475128

 $00{:}07{:}22.979 \dashrightarrow 00{:}07{:}24.599$ course clinical cores and so.

NOTE Confidence: 0.877944767475128

 $00:07:24.600 \dashrightarrow 00:07:26.634$ It's a very useful and important

NOTE Confidence: 0.877944767475128

00:07:26.634 --> 00:07:27.990 marker in covert patients,

NOTE Confidence: 0.877944767475128

 $00{:}07{:}27{.}990 \dashrightarrow 00{:}07{:}29{.}685$ both for throm bosis and also

NOTE Confidence: 0.877944767475128

 $00:07:29.685 \longrightarrow 00:07:31.380$ for their overall disease cores,

NOTE Confidence: 0.877944767475128

 $00{:}07{:}31{.}380 \dashrightarrow 00{:}07{:}32{.}541$ and then throm bin,

NOTE Confidence: 0.877944767475128

 $00:07:32.541 \dashrightarrow 00:07:34.089$ antithrombin complexes you can

- NOTE Confidence: 0.877944767475128
- $00:07:34.089 \longrightarrow 00:07:36.645$ think of those as sort of a fancy
- NOTE Confidence: 0.877944767475128
- $00{:}07{:}36.645 \dashrightarrow 00{:}07{:}38.390$ and more specific D dimer that
- NOTE Confidence: 0.877944767475128
- $00:07:38.390 \longrightarrow 00:07:40.496$ really looks at whether AD dimer
- NOTE Confidence: 0.877944767475128
- $00:07:40.496 \longrightarrow 00:07:41.888$ elevation comes from activation
- NOTE Confidence: 0.877944767475128
- $00:07:41.888 \dashrightarrow 00:07:43.578$ of the Quag Elation Cascade.
- NOTE Confidence: 0.877944767475128
- 00:07:43.580 --> 00:07:45.338 So when we measured D dimer
- NOTE Confidence: 0.877944767475128
- $00{:}07{:}45.338 \dashrightarrow 00{:}07{:}47.200$ levels an from an anti thrombin
- NOTE Confidence: 0.877944767475128
- $00{:}07{:}47.200 \dashrightarrow 00{:}07{:}49.696$ complex is both in ICU and non ICU
- NOTE Confidence: 0.877944767475128
- $00:07:49.766 \dashrightarrow 00:07:51.718$ patients with colon infection.
- NOTE Confidence: 0.877944767475128
- $00:07:51.720 \longrightarrow 00:07:54.424$ We found that both of these were elevated,
- NOTE Confidence: 0.877944767475128
- $00:07:54.430 \longrightarrow 00:07:55.282$ particularly in patients.
- NOTE Confidence: 0.877944767475128
- $00{:}07{:}55{.}282 \dashrightarrow 00{:}07{:}57{.}912$ We were in the ICU and on a separate
- NOTE Confidence: 0.877944767475128
- $00:07:57.912 \rightarrow 00:07:59.942$ analysis we found that the D dimer
- NOTE Confidence: 0.877944767475128
- $00{:}07{:}59{.}942 \dashrightarrow 00{:}08{:}02{.}054$ levels and from an anti thrombin
- NOTE Confidence: 0.877944767475128
- $00:08:02.054 \rightarrow 00:08:03.466$ complex is correlated together.
- NOTE Confidence: 0.877944767475128

 $00:08:03.470 \longrightarrow 00:08:05.710$ So this let us know that the source

NOTE Confidence: 0.877944767475128

 $00{:}08{:}05{.}710 \dashrightarrow 00{:}08{:}08{.}612$ of the high D dimer encoded associated

NOTE Confidence: 0.877944767475128

 $00:08:08.612 \longrightarrow 00:08:10.428$ Coagulopathy is indeed activation

NOTE Confidence: 0.877944767475128

 $00:08:10.428 \longrightarrow 00:08:12.618$ of the Quag Elation Cascade.

NOTE Confidence: 0.877944767475128

 $00{:}08{:}12.620 \dashrightarrow 00{:}08{:}15.059$ The next thing we did was to measure a

NOTE Confidence: 0.877944767475128

 $00:08:15.059 \rightarrow 00:08:17.138$ number of endogenous anticoagulants,

NOTE Confidence: 0.877944767475128

00:08:17.140 --> 00:08:19.228 antithrombin, protein C, and protein S,

NOTE Confidence: 0.877944767475128

 $00:08:19.230 \rightarrow 00:08:21.666$ as well as a fire analytic enzyme

NOTE Confidence: 0.877944767475128

 $00{:}08{:}21.666 \dashrightarrow 00{:}08{:}22.710$ called A2 Antiplasmin.

NOTE Confidence: 0.877944767475128

 $00:08:22.710 \longrightarrow 00:08:24.798$ So what are all of these?

NOTE Confidence: 0.877944767475128

 $00:08:24.800 \longrightarrow 00:08:25.841$ Whenever you form,

NOTE Confidence: 0.877944767475128

 $00{:}08{:}25.841 \dashrightarrow 00{:}08{:}26.882$ activate coagulations through

NOTE Confidence: 0.877944767475128

 $00:08:26.882 \longrightarrow 00:08:27.923$ the coagulation cascade,

NOTE Confidence: 0.877944767475128

 $00{:}08{:}27{.}930 \dashrightarrow 00{:}08{:}30{.}198$ the body has a natural mechanism to

NOTE Confidence: 0.877944767475128

 $00:08:30.198 \rightarrow 00:08:31.920$ shut off Coagulations and therefore

NOTE Confidence: 0.877944767475128

 $00:08:31.920 \rightarrow 00:08:33.630$ prevent from boces from getting

 $00{:}08{:}33{.}630 \dashrightarrow 00{:}08{:}36{.}182$ out of control and so that natural

NOTE Confidence: 0.877944767475128

 $00{:}08{:}36.182 \dashrightarrow 00{:}08{:}38.017$ mechanism happens through two sources.

NOTE Confidence: 0.877944767475128

 $00:08:38.020 \longrightarrow 00:08:39.360$ One is through endogenous

NOTE Confidence: 0.877944767475128

 $00:08:39.360 \dashrightarrow 00:08:41.370$ anticoagulants that are designed to turn

NOTE Confidence: 0.88461709022522

 $00:08:41.426 \rightarrow 00:08:42.898$ off the Coagulations Cascade,

NOTE Confidence: 0.88461709022522

 $00{:}08{:}42{.}900 \dashrightarrow 00{:}08{:}45{.}420$ and those are these first three up.

NOTE Confidence: 0.88461709022522

 $00{:}08{:}45{.}420 \dashrightarrow 00{:}08{:}47{.}125$ Top antithrombin protein protein S

NOTE Confidence: 0.88461709022522

 $00:08:47.125 \longrightarrow 00:08:49.906$ and then the 2nd way that the body

NOTE Confidence: 0.88461709022522

 $00{:}08{:}49{.}906 \dashrightarrow 00{:}08{:}51{.}581$ regulates the Quag elation cascade

NOTE Confidence: 0.88461709022522

00:08:51.581 --> 00:08:54.407 is to turn on fiber analysis or the

NOTE Confidence: 0.88461709022522

 $00:08:54.407 \longrightarrow 00:08:56.468$ process of digesting blood clots that

NOTE Confidence: 0.88461709022522

 $00:08:56.468 \rightarrow 00:08:58.806$ are formed and the principal enzyme that

NOTE Confidence: 0.88461709022522

 $00:08:58.806 \dashrightarrow 00:09:00.990$ does this is called A2 Antiplasmin.

NOTE Confidence: 0.88461709022522

 $00{:}09{:}00{.}990 \dashrightarrow 00{:}09{:}03{.}066$ So as you can see here,

NOTE Confidence: 0.88461709022522

 $00:09:03.070 \rightarrow 00:09:05.140$ when we measured in documents anticoagulants,

 $00:09:05.140 \rightarrow 00:09:07.422$ antithrombin protein protein S in ICU and

NOTE Confidence: 0.88461709022522

 $00:09:07.422 \rightarrow 00:09:09.638$ non ICU patients with colon infection,

NOTE Confidence: 0.88461709022522

 $00:09:09.640 \rightarrow 00:09:12.408$ we found that they were basically on normal.

NOTE Confidence: 0.88461709022522

 $00:09:12.410 \rightarrow 00:09:14.135$ Normal is usually anything about

NOTE Confidence: 0.88461709022522

 $00{:}09{:}14.135 \dashrightarrow 00{:}09{:}16.260$ 80% and as you can see.

NOTE Confidence: 0.88461709022522

 $00:09:16.260 \rightarrow 00:09:18.486$ All of these patients had essentially

NOTE Confidence: 0.88461709022522

 $00{:}09{:}18.486 \dashrightarrow 00{:}09{:}20.380$ antis arm approaching CN Protein

NOTE Confidence: 0.88461709022522

 $00:09:20.380 \longrightarrow 00:09:21.768$ S levels around 100%,

NOTE Confidence: 0.88461709022522

 $00{:}09{:}21.770 \dashrightarrow 00{:}09{:}23.966$ indicating that there was not excessive

NOTE Confidence: 0.88461709022522

 $00:09:23.966 \rightarrow 00:09:25.064$ consumption of anticoagulants.

NOTE Confidence: 0.88461709022522

 $00{:}09{:}25{.}070 \dashrightarrow 00{:}09{:}27{.}272$ Endogenous Lee and then we also

NOTE Confidence: 0.88461709022522

 $00{:}09{:}27{.}272 \dashrightarrow 00{:}09{:}28{.}740$ looked at A2 Antiplasmin.

NOTE Confidence: 0.88461709022522

 $00:09:28.740 \longrightarrow 00:09:30.204$ The main fibrinolytic enzyme

NOTE Confidence: 0.88461709022522

 $00:09:30.204 \rightarrow 00:09:31.668$ that I just mentioned,

NOTE Confidence: 0.88461709022522

00:09:31.670 --> 00:09:33.505 and again here you can

NOTE Confidence: 0.88461709022522

 $00:09:33.505 \rightarrow 00:09:35.340$ see the levels in both.

 $00:09:35.340 \longrightarrow 00:09:38.124$ I see you in an ICU patients with

NOTE Confidence: 0.88461709022522

 $00:09:38.124 \rightarrow 00:09:39.750$ colon infection were normal,

NOTE Confidence: 0.88461709022522

 $00:09:39.750 \longrightarrow 00:09:41.734$ so this let us know that when we

NOTE Confidence: 0.88461709022522

 $00:09:41.734 \rightarrow 00:09:43.475$ looked at endogenous anticoagulant

NOTE Confidence: 0.88461709022522

00:09:43.475 --> 00:09:45.248 San fibrinolytic enzymes,

NOTE Confidence: 0.88461709022522

 $00:09:45.250 \rightarrow 00:09:47.090$ we were not seeing consumption.

NOTE Confidence: 0.88461709022522

 $00:09:47.090 \longrightarrow 00:09:48.310$ Of any of these,

NOTE Confidence: 0.88461709022522

00:09:48.310 --> 00:09:49.835 and the important feature here

NOTE Confidence: 0.88461709022522

 $00:09:49.835 \longrightarrow 00:09:51.946$ is that in most patients with

NOTE Confidence: 0.88461709022522

 $00:09:51.946 \rightarrow 00:09:53.686$ DIC you should see consumption

NOTE Confidence: 0.88461709022522

 $00:09:53.749 \longrightarrow 00:09:55.459$ of endogenous anticoagulant.

NOTE Confidence: 0.88461709022522

 $00{:}09{:}55{.}460 \dashrightarrow 00{:}09{:}56{.}510$ An fibrinolytic enzymes.

NOTE Confidence: 0.88461709022522

 $00:09:56.510 \dashrightarrow 00:09:59.829$ So the fact that we were not seeing that.

NOTE Confidence: 0.88461709022522

 $00{:}09{:}59{.}830 \dashrightarrow 00{:}10{:}03{.}505$ Let us know that CAC is probably

NOTE Confidence: 0.88461709022522

 $00:10:03.505 \rightarrow 00:10:05.420$ mechanistically distinct from DC.

 $00:10:05.420 \longrightarrow 00:10:07.401$ The next thing we did was to

NOTE Confidence: 0.88461709022522

 $00:10:07.401 \rightarrow 00:10:09.191$ measure an enzyme called plasminogen

NOTE Confidence: 0.88461709022522

 $00:10:09.191 \longrightarrow 00:10:11.386$ activator inhibitor or Pai one.

NOTE Confidence: 0.88461709022522

 $00:10:11.390 \rightarrow 00:10:13.658$ This is the main negative regulator

NOTE Confidence: 0.88461709022522

 $00{:}10{:}13.658 \dashrightarrow 00{:}10{:}15.881$ of fiber analysis and what we

NOTE Confidence: 0.88461709022522

 $00{:}10{:}15{.}881 \dashrightarrow 00{:}10{:}17{.}795$ found was that this was elevated

NOTE Confidence: 0.88461709022522

 $00:10:17.795 \dashrightarrow 00:10:20.159$ both in ICU and non ICU patients.

NOTE Confidence: 0.88461709022522

 $00{:}10{:}20.160 \dashrightarrow 00{:}10{:}22.200$ The significance of this is that

NOTE Confidence: 0.88461709022522

00:10:22.200 --> 00:10:24.487 whenever we see this elevated it

NOTE Confidence: 0.88461709022522

 $00{:}10{:}24.487 \dashrightarrow 00{:}10{:}26.637$ sometimes will suggest that fiber

NOTE Confidence: 0.88461709022522

 $00{:}10{:}26.637 \dashrightarrow 00{:}10{:}28.800$ analysis is inhibited and so it

NOTE Confidence: 0.88461709022522

 $00{:}10{:}28{.}800 \dashrightarrow 00{:}10{:}30{.}683$ makes us wonder when we see this

NOTE Confidence: 0.88461709022522

 $00{:}10{:}30.690 \dashrightarrow 00{:}10{:}32.446$ weather perhaps encoded associated

NOTE Confidence: 0.88461709022522

 $00{:}10{:}32{.}446 \dashrightarrow 00{:}10{:}35{.}080$ Coagulopathy there may be an inhibition

NOTE Confidence: 0.88461709022522

 $00:10:35.143 \rightarrow 00:10:37.188$ of Clock breakdown which might

NOTE Confidence: 0.88461709022522

 $00{:}10{:}37.188 \dashrightarrow 00{:}10{:}39.233$ contribute to overall thrombosis risk.

 $00:10:39.240 \longrightarrow 00:10:41.322$ And then the last thing we

NOTE Confidence: 0.88461709022522

 $00:10:41.322 \longrightarrow 00:10:43.820$ did was at the very bottom.

NOTE Confidence: 0.88461709022522

 $00:10:43.820 \longrightarrow 00:10:45.730$ Here we measured three tests,

NOTE Confidence: 0.88461709022522

 $00:10:45.730 \longrightarrow 00:10:46.879$ von Willebrands Factor,

NOTE Confidence: 0.88461709022522

00:10:46.879 --> 00:10:48.794 Antigen von Willebrands factor activity

NOTE Confidence: 0.88461709022522

 $00:10:48.794 \rightarrow 00:10:50.699$ and factor 8 coagulations level.

NOTE Confidence: 0.88461709022522

 $00:10:50.700 \rightarrow 00:10:53.367$ So what are these fun Willebrand factor?

NOTE Confidence: 0.88461709022522

 $00{:}10{:}53{.}370 \dashrightarrow 00{:}10{:}55{.}315$ Is a hemostatic factor that's

NOTE Confidence: 0.88461709022522

 $00{:}10{:}55{.}315 \dashrightarrow 00{:}10{:}57{.}260$ released by endothelial cells and

NOTE Confidence: 0.88461709022522

 $00:10:57.326 \rightarrow 00:10:59.486$ the purpose in coagulations of fun.

NOTE Confidence: 0.88461709022522

 $00{:}10{:}59{.}490 \dashrightarrow 00{:}11{:}01{.}220$ Willebrand factor is basically to

NOTE Confidence: 0.88461709022522

 $00{:}11{:}01{.}220 \dashrightarrow 00{:}11{:}03{.}427$ help platelets bind to sites of

NOTE Confidence: 0.88461709022522

 $00{:}11{:}03{.}427 \dashrightarrow 00{:}11{:}05{.}099$ damaged endothelium and initiate

NOTE Confidence: 0.88461709022522

00:11:05.099 --> 00:11:06.353 primary hemostat stasis,

NOTE Confidence: 0.88461709022522

 $00:11:06.360 \longrightarrow 00:11:08.270$ which is important for blood

 $00:11:08.270 \longrightarrow 00:11:09.416$ clotting factor 8.

NOTE Confidence: 0.88461709022522

 $00:11:09.420 \rightarrow 00:11:11.778$ Separately is a coagulations factor that.

NOTE Confidence: 0.88461709022522

 $00{:}11{:}11.780 \dashrightarrow 00{:}11{:}14.192$ Wines to von Willebrand factor in

NOTE Confidence: 0.88461709022522

 $00:11:14.192 \longrightarrow 00:11:16.667$ the circulation and So what we

NOTE Confidence: 0.88461709022522

 $00{:}11{:}16.667 \dashrightarrow 00{:}11{:}19.037$ notice when we measured levels of

NOTE Confidence: 0.88461709022522

00:11:19.037 --> 00:11:21.079 an will
ebrand factor in factor 8

NOTE Confidence: 0.88461709022522

00:11:21.079 --> 00:11:23.218 both in ICU and in ICU patients,

NOTE Confidence: 0.88461709022522

 $00:11:23.218 \rightarrow 00:11:26.162$ we saw that the levels were quite high,

NOTE Confidence: 0.88461709022522

 $00{:}11{:}26{.}170 \dashrightarrow 00{:}11{:}28{.}228$ and in particular the levels were

NOTE Confidence: 0.88461709022522

00:11:28.228 --> 00:11:30.230 super elevated in ICU patients,

NOTE Confidence: 0.88461709022522

 $00{:}11{:}30{.}230 \dashrightarrow 00{:}11{:}33{.}182$ and I just want to show you another

NOTE Confidence: 0.88461709022522

00:11:33.182 --> 00:11:33.920 curve here.

NOTE Confidence: 0.88461709022522

00:11:33.920 --> 00:11:36.224 This right here are DOT plots

NOTE Confidence: 0.88461709022522

00:11:36.224 --> 00:11:38.165 showing Refactor Antigen one factor

NOTE Confidence: 0.88461709022522

00:11:38.165 --> 00:11:40.482 activity and factor 8 in ICU versus

NOTE Confidence: 0.88461709022522

 $00:11:40.482 \rightarrow 00:11:42.810$ non ICU patients with the green.

- NOTE Confidence: 0.88461709022522
- $00:11:42.810 \longrightarrow 00:11:44.062$ Rose indicating what the
- NOTE Confidence: 0.88461709022522
- $00:11:44.062 \rightarrow 00:11:45.314$ normal ranges should be,
- NOTE Confidence: 0.88461709022522
- $00:11:45.320 \longrightarrow 00:11:46.890$ so again based on this,
- NOTE Confidence: 0.898008227348328
- $00:11:46.890 \rightarrow 00:11:49.266$ as you can see, one will benefactor in
- NOTE Confidence: 0.898008227348328
- $00{:}11{:}49.266 \dashrightarrow 00{:}11{:}51.575$ factor 8 levels are elevated both in
- NOTE Confidence: 0.898008227348328
- $00{:}11{:}51{.}575 \dashrightarrow 00{:}11{:}54{.}109$ ICU and non ICU patients with Cove it,
- NOTE Confidence: 0.898008227348328
- 00:11:54.110 -> 00:11:56.308 but there are through the roof high,
- NOTE Confidence: 0.898008227348328
- $00:11:56.310 \rightarrow 00:11:57.566$ particularly for von Willebrands
- NOTE Confidence: 0.898008227348328
- 00:11:57.566 --> 00:11:59.136 factor in the ICU patients.
- NOTE Confidence: 0.898008227348328
- $00:11:59.140 \longrightarrow 00:12:01.282$ The significance here is that the major
- NOTE Confidence: 0.898008227348328
- $00{:}12{:}01{.}282 \dashrightarrow 00{:}12{:}03{.}820$ source of on lower end factor in the
- NOTE Confidence: 0.898008227348328
- $00{:}12{:}03.820 \dashrightarrow 00{:}12{:}06.064$ body as it circulates through the blood
- NOTE Confidence: 0.898008227348328
- $00:12:06.064 \rightarrow 00:12:07.936$ is endothelial cells and so whenever
- NOTE Confidence: 0.898008227348328
- $00{:}12{:}07{.}936 \dashrightarrow 00{:}12{:}09{.}945$ we see this sort of pattern where
- NOTE Confidence: 0.898008227348328
- $00:12:09.945 \longrightarrow 00:12:12.461$ we have very very high levels of fun
- NOTE Confidence: 0.898008227348328

 $00:12:12.461 \rightarrow 00:12:14.609$ willebrand factor circulating in the blood.

NOTE Confidence: 0.898008227348328

00:12:14.610 --> 00:12:16.836 It tends to point towards a

NOTE Confidence: 0.898008227348328

00:12:16.836 --> 00:12:18.320 pattern of endothelial injury.

NOTE Confidence: 0.898008227348328

00:12:18.320 --> 00:12:20.030 In addition, von Willebrands factor

NOTE Confidence: 0.898008227348328

00:12:20.030 --> 00:12:22.400 can also be stored in platelets,

NOTE Confidence: 0.898008227348328

 $00:12:22.400 \longrightarrow 00:12:24.626$ and so looking at this pattern,

NOTE Confidence: 0.898008227348328

 $00{:}12{:}24.630 \dashrightarrow 00{:}12{:}26.989$ it made us wonder if perhaps both

NOTE Confidence: 0.898008227348328

 $00:12:26.989 \longrightarrow 00:12:28.433$ endothelial cells and platelets

NOTE Confidence: 0.898008227348328

 $00{:}12{:}28{.}433 \dashrightarrow 00{:}12{:}30{.}273$ were being hyper activated in

NOTE Confidence: 0.898008227348328

 $00:12:30.273 \longrightarrow 00:12:32.420$ the setting of coded infection.

NOTE Confidence: 0.898008227348328

00:12:32.420 --> 00:12:34.040 Particularly as patients

NOTE Confidence: 0.898008227348328

 $00:12:34.040 \longrightarrow 00:12:36.200$ progressed to critical illness.

NOTE Confidence: 0.898008227348328

 $00:12:36.200 \longrightarrow 00:12:38.366$ So in order to test this,

NOTE Confidence: 0.898008227348328

 $00:12:38.370 \longrightarrow 00:12:40.918$ we were interested in looking at specific

NOTE Confidence: 0.898008227348328

 $00:12:40.918 \rightarrow 00:12:42.766$ markers of endothelial function and

NOTE Confidence: 0.898008227348328

 $00:12:42.766 \rightarrow 00:12:44.854$ platelet activation and so for this,

- NOTE Confidence: 0.898008227348328
- $00{:}12{:}44.860 \dashrightarrow 00{:}12{:}46.232$ we collaborated with Doctor
- NOTE Confidence: 0.898008227348328
- 00:12:46.232 --> 00:12:47.604 Hengchun who's an investigator
- NOTE Confidence: 0.898008227348328
- $00:12:47.604 \rightarrow 00:12:49.560$ in the Cardiology Section who,
- NOTE Confidence: 0.898008227348328
- $00:12:49.560 \rightarrow 00:12:51.360$ along with his two postdocs,
- NOTE Confidence: 0.898008227348328
- $00:12:51.360 \rightarrow 00:12:53.170$ doctor home Chang and doctor,
- NOTE Confidence: 0.898008227348328
- $00{:}12{:}53{.}170 \dashrightarrow 00{:}12{:}55{.}210$ honey and Zhang performed a series
- NOTE Confidence: 0.898008227348328
- $00:12:55.210 \longrightarrow 00:12:57.902$ of experiments on all of our ICU and
- NOTE Confidence: 0.898008227348328
- $00{:}12{:}57{.}902 \dashrightarrow 00{:}12{:}59{.}798$ non ICU patients looking at different
- NOTE Confidence: 0.898008227348328
- $00{:}12{:}59.863 \dashrightarrow 00{:}13{:}01.515$ endothelial and platelet activation
- NOTE Confidence: 0.898008227348328
- $00{:}13{:}01{.}515 \dashrightarrow 00{:}13{:}03{.}993$ markers and the specific ones we
- NOTE Confidence: 0.898008227348328
- $00:13:04.000 \rightarrow 00:13:06.226$ looked at were soluble key selecting.
- NOTE Confidence: 0.898008227348328
- $00:13:06.230 \rightarrow 00:13:08.470$ Which is shown up in the top left,
- NOTE Confidence: 0.898008227348328
- $00{:}13{:}08{.}470 \dashrightarrow 00{:}13{:}10{.}150$ which is a marker of both
- NOTE Confidence: 0.898008227348328
- $00{:}13{:}10{.}150 \dashrightarrow 00{:}13{:}11{.}270$ endothelial cells and platelets.
- NOTE Confidence: 0.898008227348328
- $00:13:11.270 \longrightarrow 00:13:12.670$ And then we also looked
- NOTE Confidence: 0.898008227348328

00:13:12.670 --> 00:13:14.070 at soluble CD 40 ligand,

NOTE Confidence: 0.898008227348328

00:13:14.070 --> 00:13:15.750 which is seen which is released

NOTE Confidence: 0.898008227348328

 $00:13:15.750 \longrightarrow 00:13:16.870$ by platelets and lymphocytes.

NOTE Confidence: 0.898008227348328

 $00:13:16.870 \longrightarrow 00:13:18.865$ And then Lastly we looked at soluble

NOTE Confidence: 0.898008227348328

 $00{:}13{:}18.865 \dashrightarrow 00{:}13{:}21.173$ from a module in which is specific

NOTE Confidence: 0.898008227348328

 $00:13:21.173 \longrightarrow 00:13:22.569$ mostly to endothelial cells.

NOTE Confidence: 0.898008227348328

 $00{:}13{:}22{.}570 \dashrightarrow 00{:}13{:}24{.}325$ Come here because these are

NOTE Confidence: 0.898008227348328

 $00:13:24.325 \longrightarrow 00:13:25.378$ all research tests.

NOTE Confidence: 0.898008227348328

 $00:13:25.380 \rightarrow 00:13:26.865$ They don't have normal reference

NOTE Confidence: 0.898008227348328

 $00{:}13{:}26.865 \dashrightarrow 00{:}13{:}29.846$ range is so as a result we also got

NOTE Confidence: 0.898008227348328

00:13:29.846 --> 00:13:31.636 blood from 13 different control

NOTE Confidence: 0.898008227348328

00:13:31.636 --> 00:13:33.449 patients or control individuals,

NOTE Confidence: 0.898008227348328

 $00:13:33.450 \longrightarrow 00:13:35.205$ many of whom are listening

NOTE Confidence: 0.898008227348328

 $00{:}13{:}35{.}205 \dashrightarrow 00{:}13{:}36{.}960$ to this talk right now.

NOTE Confidence: 0.898008227348328

 $00:13:36.960 \rightarrow 00:13:39.032$ So the significance of this is that

NOTE Confidence: 0.898008227348328

 $00{:}13{:}39{.}032 \dashrightarrow 00{:}13{:}41{.}436$ when we looked at all these three

 $00:13:41.436 \rightarrow 00:13:43.246$ different markers of endothelial cell

NOTE Confidence: 0.898008227348328

00:13:43.246 --> 00:13:45.388 plus or minus platelet activation,

NOTE Confidence: 0.898008227348328

 $00:13:45.390 \rightarrow 00:13:47.966$ we saw in pretty much every single case

NOTE Confidence: 0.898008227348328

 $00:13:47.966 \rightarrow 00:13:50.527$ that the levels were higher in ICU

NOTE Confidence: 0.898008227348328

 $00:13:50.527 \rightarrow 00:13:52.780$ patients with kovid than they were.

NOTE Confidence: 0.898008227348328

 $00{:}13{:}52{.}780 \dashrightarrow 00{:}13{:}54{.}892$ Then controls in the case of

NOTE Confidence: 0.898008227348328

 $00{:}13{:}54.892 \dashrightarrow 00{:}13{:}55.596$ soluble thrombo modulin.

NOTE Confidence: 0.898008227348328

 $00:13:55.600 \rightarrow 00:13:58.048$ We did not see a significant change in

NOTE Confidence: 0.898008227348328

 $00:13:58.048 \rightarrow 00:14:00.519$ the level of soluble thermal modeling.

NOTE Confidence: 0.898008227348328

 $00:14:00.520 \rightarrow 00:14:01.960$ ICU versus control patients.

NOTE Confidence: 0.898008227348328

 $00:14:01.960 \longrightarrow 00:14:04.540$ But what we did notice was that

NOTE Confidence: 0.898008227348328

 $00{:}14{:}04{.}540 \dashrightarrow 00{:}14{:}06{.}622$ there were several patients in the

NOTE Confidence: 0.898008227348328

 $00{:}14{:}06.622 \dashrightarrow 00{:}14{:}09.405$ ICU group who had a quite high level

NOTE Confidence: 0.898008227348328

 $00{:}14{:}09{.}405 \dashrightarrow 00{:}14{:}11{.}422$ of soluble thermal module in that

NOTE Confidence: 0.898008227348328

 $00{:}14{:}11{.}422 \dashrightarrow 00{:}14{:}13{.}474$ made us think that perhaps there

 $00:14:13.474 \rightarrow 00:14:15.806$ was something going on with soluble

NOTE Confidence: 0.898008227348328

 $00:14:15.806 \longrightarrow 00:14:17.462$ thermal modeling and therefore

NOTE Confidence: 0.898008227348328

 $00:14:17.462 \longrightarrow 00:14:19.448$ endothelial cells that might be

NOTE Confidence: 0.898008227348328

00:14:19.448 --> 00:14:20.808 specific to ICU patients.

NOTE Confidence: 0.898008227348328

 $00{:}14{:}20{.}810 \dashrightarrow 00{:}14{:}23{.}026$ And so when we did a series of

NOTE Confidence: 0.898008227348328

 $00{:}14{:}23.026 \dashrightarrow 00{:}14{:}25.274$ tests looking at all these different

NOTE Confidence: 0.898008227348328

00:14:25.274 --> 00:14:27.304 markers and comparing to mortality,

NOTE Confidence: 0.898008227348328

 $00:14:27.310 \rightarrow 00:14:29.272$ we found that interesting Lee soluble

NOTE Confidence: 0.898008227348328

00:14:29.272 --> 00:14:30.253 thrombo
modulin level segregated

NOTE Confidence: 0.898008227348328

 $00:14:30.253 \rightarrow 00:14:31.070$ with mortality.

NOTE Confidence: 0.898008227348328

 $00:14:31.070 \longrightarrow 00:14:33.692$ Whether we looked at the entire

NOTE Confidence: 0.898008227348328

 $00{:}14{:}33{.}692 \dashrightarrow 00{:}14{:}35{.}933$ population in our cohort or

NOTE Confidence: 0.898008227348328

 $00{:}14{:}35{.}933 \dashrightarrow 00{:}14{:}38{.}405$ whether we looked at ICU patients.

NOTE Confidence: 0.898008227348328

00:14:38.410 --> 00:14:40.380 Alright, so putting this altogether,

NOTE Confidence: 0.898008227348328

 $00:14:40.380 \rightarrow 00:14:43.524$ what did we learn from from these studies?

NOTE Confidence: 0.865365564823151

00:14:43.530 --> 00:14:45.090 First in measuring different

- NOTE Confidence: 0.865365564823151
- $00:14:45.090 \rightarrow 00:14:46.650$ levels of endogenous anticoagulant
- NOTE Confidence: 0.865365564823151
- $00:14:46.650 \longrightarrow 00:14:47.870$ sand fibrinolytic enzymes,
- NOTE Confidence: 0.865365564823151
- $00{:}14{:}47.870 \dashrightarrow 00{:}14{:}49.982$ we found that antithrom bin protein to
- NOTE Confidence: 0.865365564823151
- $00{:}14{:}49{.}982 \dashrightarrow 00{:}14{:}52{.}755$ protein S and A2 anti plasm overall
- NOTE Confidence: 0.865365564823151
- $00{:}14{:}52.755 \dashrightarrow 00{:}14{:}55.341$ preserved which is distinct from DIC
- NOTE Confidence: 0.865365564823151
- $00{:}14{:}55{.}341 \dashrightarrow 00{:}14{:}57{.}377$ indicating that indeed code associated
- NOTE Confidence: 0.865365564823151
- $00{:}14{:}57{.}377 \dashrightarrow 00{:}15{:}00{.}083$ Coagulopathy is not the same as DIC.
- NOTE Confidence: 0.865365564823151
- $00:15:00.083 \rightarrow 00:15:03.227$ We also learned that Pai one is elevated,
- NOTE Confidence: 0.865365564823151
- $00{:}15{:}03.230 \dashrightarrow 00{:}15{:}04.806$ encoded associated Coagulopathy suggesting
- NOTE Confidence: 0.865365564823151
- $00:15:04.806 \rightarrow 00:15:07.170$ that fiber analysis might be inhibited.
- NOTE Confidence: 0.865365564823151
- $00:15:07.170 \longrightarrow 00:15:08.580$ Although we haven't
- NOTE Confidence: 0.865365564823151
- $00:15:08.580 \longrightarrow 00:15:09.990$ completely confirmed that.
- NOTE Confidence: 0.865365564823151
- 00:15:09.990 --> 00:15:10.690 In addition,
- NOTE Confidence: 0.865365564823151
- $00{:}15{:}10.690 \dashrightarrow 00{:}15{:}12.790$ we saw that on Willebrand factor,
- NOTE Confidence: 0.865365564823151
- 00:15:12.790 00:15:14.890 in factory levels, which are markers,
- NOTE Confidence: 0.865365564823151

00:15:14.890 --> 00:15:16.640 particularly endothelial cells and platelets,

NOTE Confidence: 0.865365564823151

 $00:15:16.640 \longrightarrow 00:15:18.390$ are elevated in both non

NOTE Confidence: 0.865365564823151

00:15:18.390 --> 00:15:19.790 ICU and ICU patients,

NOTE Confidence: 0.865365564823151

 $00:15:19.790 \longrightarrow 00:15:21.390$ and in particular are through

NOTE Confidence: 0.865365564823151

 $00:15:21.390 \longrightarrow 00:15:23.640$ the roof high in ICU patients,

NOTE Confidence: 0.865365564823151

 $00{:}15{:}23.640 \dashrightarrow 00{:}15{:}25.482$ suggesting that there is a significant

NOTE Confidence: 0.865365564823151

00:15:25.482 --> 00:15:27.588 component of any Philly Opathy and

NOTE Confidence: 0.865365564823151

 $00:15:27.588 \rightarrow 00:15:29.240$ platelet activation encoding infection,

NOTE Confidence: 0.865365564823151

 $00{:}15{:}29{.}240 \dashrightarrow 00{:}15{:}30{.}584$ particularly as patients

NOTE Confidence: 0.865365564823151

 $00:15:30.584 \rightarrow 00:15:31.928$ become critically ill.

NOTE Confidence: 0.865365564823151

 $00:15:31.930 \longrightarrow 00:15:32.833$ And then Lastly,

NOTE Confidence: 0.865365564823151

 $00{:}15{:}32{.}833 \dashrightarrow 00{:}15{:}34{.}639$ we saw that when we measured

NOTE Confidence: 0.865365564823151

 $00{:}15{:}34.639 \dashrightarrow 00{:}15{:}36.241$ specific markers of endothelial

NOTE Confidence: 0.865365564823151

 $00:15:36.241 \rightarrow 00:15:37.897$ cell and platelet activation,

NOTE Confidence: 0.865365564823151

 $00:15:37.900 \longrightarrow 00:15:40.228$ we found that these were elevated in ICU

NOTE Confidence: 0.865365564823151

 $00:15:40.228 \rightarrow 00:15:42.109$ patients with soluble thrombomodulin,

- NOTE Confidence: 0.865365564823151
- $00:15:42.110 \rightarrow 00:15:44.900$ which is quite specific for endothelial
- NOTE Confidence: 0.865365564823151
- $00:15:44.900 \rightarrow 00:15:46.760$ function segregating with mortality.
- NOTE Confidence: 0.865365564823151
- 00:15:46.760 --> 00:15:47.684 So In conclusion,
- NOTE Confidence: 0.865365564823151
- $00{:}15{:}47.684 \dashrightarrow 00{:}15{:}49.840$ what we believe our data shows is
- NOTE Confidence: 0.865365564823151
- $00{:}15{:}49{.}904 \dashrightarrow 00{:}15{:}51{.}929$ that code associated Coagulo pathy is
- NOTE Confidence: 0.865365564823151
- $00{:}15{:}51{.}929 \dashrightarrow 00{:}15{:}54{.}463$ actually an Endo Philly Opathy where
- NOTE Confidence: 0.865365564823151
- $00{:}15{:}54{.}463 \dashrightarrow 00{:}15{:}56{.}698$ you see augmented von Willebrands
- NOTE Confidence: 0.865365564823151
- $00{:}15{:}56.698 \dashrightarrow 00{:}15{:}58.857$ factor release platelet activation an
- NOTE Confidence: 0.865365564823151
- $00{:}15{:}58.857 \dashrightarrow 00{:}16{:}00{.}325$ hypercoagulability all coming together
- NOTE Confidence: 0.865365564823151
- $00:16:00.325 \rightarrow 00:16:02.790$ causing an increased risk of thrombosis,
- NOTE Confidence: 0.865365564823151
- 00:16:02.790 --> 00:16:03.963 including Venus thromboembolism,
- NOTE Confidence: 0.865365564823151
- $00{:}16{:}03{.}963 \dashrightarrow 00{:}16{:}05{.}527$ Artur thrombosis and also
- NOTE Confidence: 0.865365564823151
- $00{:}16{:}05{.}527 \dashrightarrow 00{:}16{:}06{.}309$ microvascular thrombus.
- NOTE Confidence: 0.865365564823151
- 00:16:06.310 --> 00:16:07.084 In addition,
- NOTE Confidence: 0.865365564823151
- $00{:}16{:}07.084 \dashrightarrow 00{:}16{:}08.632$ we think that endothelial
- NOTE Confidence: 0.865365564823151

00:16:08.632 --> 00:16:11.025 dysfunction or injury is a marker

NOTE Confidence: 0.865365564823151

 $00{:}16{:}11.025 \dashrightarrow 00{:}16{:}12.960$ of progression of critical illness,

NOTE Confidence: 0.865365564823151

 $00{:}16{:}12{.}960 \dashrightarrow 00{:}16{:}15{.}102$ encoded 19 infection and we find

NOTE Confidence: 0.865365564823151

 $00:16:15.102 \longrightarrow 00:16:17.498$ that soluble from a modeling as

NOTE Confidence: 0.865365564823151

00:16:17.498 --> 00:16:19.286 a specific endothelial marker

NOTE Confidence: 0.865365564823151

 $00:16:19.286 \rightarrow 00:16:21.830$ seems to segregate with mortality.

NOTE Confidence: 0.865365564823151

00:16:21.830 --> 00:16:22.124 Um,

NOTE Confidence: 0.865365564823151

 $00:16:22.124 \rightarrow 00:16:24.476$ the importance of all of this is that

NOTE Confidence: 0.865365564823151

 $00{:}16{:}24.476 \dashrightarrow 00{:}16{:}26.479$ it's made us wonder if there might

NOTE Confidence: 0.865365564823151

 $00{:}16{:}26{.}479 \dashrightarrow 00{:}16{:}28{.}530$ be a role for adding antiplate let

NOTE Confidence: 0.865365564823151

 $00{:}16{:}28.530 \dashrightarrow 00{:}16{:}30.735$ or even endothelial cell modifying

NOTE Confidence: 0.865365564823151

 $00:16:30.735 \rightarrow 00:16:32.752$ therapy to our anticoagulation algorithm.

NOTE Confidence: 0.865365564823151

 $00:16:32.752 \longrightarrow 00:16:35.174$ And so early on while we were

NOTE Confidence: 0.865365564823151

 $00:16:35.174 \rightarrow 00:16:36.149$ developing this story,

NOTE Confidence: 0.865365564823151

 $00:16:36.150 \rightarrow 00:16:39.219$ we met with a number of the ICU directores,

NOTE Confidence: 0.865365564823151

 $00{:}16{:}39{.}220 \dashrightarrow 00{:}16{:}41{.}278$ FDA only Haven Hospital Ann through

- NOTE Confidence: 0.865365564823151
- $00:16:41.278 \longrightarrow 00:16:43.628$ a lot of discussion just I think
- NOTE Confidence: 0.865365564823151
- $00{:}16{:}43.628 \dashrightarrow 00{:}16{:}45.763$ last week or the week before a spirin
- NOTE Confidence: 0.865365564823151
- $00{:}16{:}45{.}832 \dashrightarrow 00{:}16{:}47{.}998$ was finally added to our treatment
- NOTE Confidence: 0.865365564823151
- $00{:}16{:}47{.}998 \dashrightarrow 00{:}16{:}49{.}791$ algorithm and now every patient
- NOTE Confidence: 0.865365564823151
- $00:16:49.791 \dashrightarrow 00:16:51.837$ who gets admitted to the hospital.
- NOTE Confidence: 0.865365564823151
- $00{:}16{:}51{.}840 \dashrightarrow 00{:}16{:}53{.}880$ In the ICU with colon infection,
- NOTE Confidence: 0.865365564823151
- $00:16:53.880 \rightarrow 00:16:55.580$ get started on aspirin empirically.
- NOTE Confidence: 0.889760613441467
- $00:16:57.980 \longrightarrow 00:17:00.374$ So I just want to acknowledge a lot of
- NOTE Confidence: 0.889760613441467
- $00{:}17{:}00{.}374 \dashrightarrow 00{:}17{:}02{.}418$ people who contributed to this work.
- NOTE Confidence: 0.889760613441467
- $00:17:02.420 \rightarrow 00:17:03.604$ We have this gigantic,
- NOTE Confidence: 0.889760613441467
- 00:17:03.604 --> 00:17:04.788 an amazing hematology team,
- NOTE Confidence: 0.889760613441467
- $00:17:04.790 \longrightarrow 00:17:06.270$ both on the research side.
- NOTE Confidence: 0.889760613441467
- $00:17:06.270 \longrightarrow 00:17:07.318$ In the clinical side,
- NOTE Confidence: 0.889760613441467
- $00{:}17{:}07{.}318$ --> $00{:}17{:}09{.}296$ on the left are all the trainees
- NOTE Confidence: 0.889760613441467
- $00:17:09.296 \rightarrow 00:17:10.996$ who are working with this.
- NOTE Confidence: 0.889760613441467

 $00:17:11.000 \rightarrow 00:17:12.960$ George and Alex are start fellows in

NOTE Confidence: 0.889760613441467

 $00:17:12.960 \dashrightarrow 00:17:14.848$ a particular alot of our discussions.

NOTE Confidence: 0.889760613441467

 $00{:}17{:}14.850 \dashrightarrow 00{:}17{:}16.722$ In fact pretty much every experiment

NOTE Confidence: 0.889760613441467

 $00{:}17{:}16.722 \dashrightarrow 00{:}17{:}18.637$ that we've done really started with

NOTE Confidence: 0.889760613441467

 $00{:}17{:}18.637 \dashrightarrow 00{:}17{:}20.779$ conversations at George and I had many

NOTE Confidence: 0.889760613441467

 $00:17:20.779 \longrightarrow 00:17:22.834$ months ago leading to what we have now. NOTE Confidence: 0.889760613441467

00:17:22.840 --> 00:17:24.616 Matt, my salati as I mentioned,

NOTE Confidence: 0.889760613441467

00:17:24.620 --> 00:17:26.489 is a superb PhD student Eric Chang

NOTE Confidence: 0.889760613441467

00:17:26.489 $\operatorname{-->}$ 00:17:28.947 and Yu Shen Lu are both third year

NOTE Confidence: 0.889760613441467

00:17:28.947 --> 00:17:30.904 senior medical residents who are going

NOTE Confidence: 0.889760613441467

 $00:17:30.904 \dashrightarrow 00:17:32.983$ to be our fellows this coming July.

NOTE Confidence: 0.889760613441467

 $00{:}17{:}32{.}990 \dashrightarrow 00{:}17{:}35{.}251$ And then Rebecca fine is an intern

NOTE Confidence: 0.889760613441467

 $00{:}17{:}35{.}251 \dashrightarrow 00{:}17{:}37{.}782$ who expressed some interest in doing

NOTE Confidence: 0.889760613441467

00:17:37.782 --> 00:17:39.276 immunology Hematology Research.

NOTE Confidence: 0.889760613441467

 $00{:}17{:}39{.}280 \dashrightarrow 00{:}17{:}41{.}744$ Down at the bottom are the members of

NOTE Confidence: 0.889760613441467

00:17:41.744 --> 00:17:43.751 Doctor Chung's lab who contributed this

 $00:17:43.751 \rightarrow 00:17:46.126$ worth hung Chang and honey Jang where

NOTE Confidence: 0.889760613441467

 $00:17:46.126 \rightarrow 00:17:48.702$ both postdocs as I mentioned in the middle.

NOTE Confidence: 0.889760613441467

 $00:17:48.710 \longrightarrow 00:17:50.660$ We have a number of pharmacists,

NOTE Confidence: 0.889760613441467

 $00:17:50.660 \rightarrow 00:17:52.473$ some of them are familiar to you

NOTE Confidence: 0.889760613441467

 $00:17:52.473 \rightarrow 00:17:55.263$ guys who are part of our greater team

NOTE Confidence: 0.889760613441467

 $00:17:55.263 \rightarrow 00:17:56.823$ looking at anticoagulation outcomes.

NOTE Confidence: 0.889760613441467

00:17:56.830 --> 00:17:58.130 Cajun mean Nick Difilippo,

NOTE Confidence: 0.889760613441467

00:17:58.130 --> 00:18:00.091 Dana McManus, Cantou Enedina frozen.

NOTE Confidence: 0.889760613441467

 $00:18:00.091 \rightarrow 00:18:03.150$ Uhm and then over on the right.

NOTE Confidence: 0.889760613441467

00:18:03.150 - 00:18:05.572 Here we have our amazing, outpatient,

NOTE Confidence: 0.889760613441467

00:18:05.572 --> 00:18:07.180 benign hematology clinical team.

NOTE Confidence: 0.889760613441467

00:18:07.180 --> 00:18:08.713 Audrey Gina, Andrea,

NOTE Confidence: 0.889760613441467

00:18:08.713 --> 00:18:10.757 Joy, Ann and hope.

NOTE Confidence: 0.889760613441467

 $00{:}18{:}10.760 \dashrightarrow 00{:}18{:}12.080$ Uhm, and then finally the bottom.

NOTE Confidence: 0.889760613441467

00:18:12.080 --> 00:18:13.620 I just want to acknowledge Bob Bono,

00:18:13.620 --> 00:18:14.838 who's our new chief of benign

NOTE Confidence: 0.889760613441467

00:18:14.838 --> 00:18:16.040 team and then Stephanie Helene's,

NOTE Confidence: 0.889760613441467

 $00{:}18{:}16{.}040 \dashrightarrow 00{:}18{:}18{.}371$ our section chief as both of them have been

NOTE Confidence: 0.889760613441467

 $00:18:18.371 \rightarrow 00:18:20.028$ incredibly supportive of these efforts.

NOTE Confidence: 0.889760613441467

 $00{:}18{:}20{.}030 \dashrightarrow 00{:}18{:}22{.}690$ So thank you guys and thank you

NOTE Confidence: 0.910585716366768

 $00{:}18{:}22.690 \dashrightarrow 00{:}18{:}24.585$ Charlie. Thank you and congratulations

NOTE Confidence: 0.910585716366768

 $00:18:24.585 \longrightarrow 00:18:26.924$ to you and really the entire

NOTE Confidence: 0.910585716366768

 $00:18:26.924 \rightarrow 00:18:28.819$ team on working through this.

NOTE Confidence: 0.910585716366768

 $00:18:28.820 \longrightarrow 00:18:31.516$ Uh, in a very short amount of time

NOTE Confidence: 0.910585716366768

00:18:31.516 - 00:18:33.543 and frankly making a difference

NOTE Confidence: 0.910585716366768

 $00:18:33.543 \rightarrow 00:18:36.087$ for our patients in the process.

NOTE Confidence: 0.910585716366768

 $00{:}18{:}36{.}090 \dashrightarrow 00{:}18{:}38{.}388$ and I know we have some

NOTE Confidence: 0.910585716366768

00:18:38.388 --> 00:18:39.537 questions coming through,

NOTE Confidence: 0.910585716366768

 $00:18:39.540 \longrightarrow 00:18:42.214$ but let me start by asking you.

NOTE Confidence: 0.910585716366768

 $00:18:42.220 \rightarrow 00:18:44.482$ Your research seems certainly indicates that

NOTE Confidence: 0.910585716366768

 $00:18:44.482 \rightarrow 00:18:47.577$ this is a process of interfere with damage.

 $00{:}18{:}47{.}580 \dashrightarrow 00{:}18{:}50{.}523$ And do we? What do we know about the

NOTE Confidence: 0.910585716366768

 $00:18:50.523 \rightarrow 00:18:53.348$ virus itself that lends support that?

NOTE Confidence: 0.910585716366768

 $00:18:53.350 \longrightarrow 00:18:55.954$ This would be a primary incident

NOTE Confidence: 0.910585716366768

 $00:18:55.954 \longrightarrow 00:18:57.256$ to the endothelium.

NOTE Confidence: 0.912236750125885

00:18:57.830 --> 00:18:59.780 Yeah, that's a great question,

NOTE Confidence: 0.912236750125885

 $00{:}18{:}59{.}780 \dashrightarrow 00{:}19{:}03{.}272$ so there does seem to be in autopsy studies.

NOTE Confidence: 0.912236750125885

00:19:03.280 --> 00:19:05.608 A certain component of endothelial leitis,

NOTE Confidence: 0.912236750125885

 $00:19:05.610 \rightarrow 00:19:08.102$ which some people have shown might be

NOTE Confidence: 0.912236750125885

 $00:19:08.102 \longrightarrow 00:19:10.280$ related to direct viral infection.

NOTE Confidence: 0.912236750125885

 $00:19:10.280 \rightarrow 00:19:12.356$ So there have been autopsy studies

NOTE Confidence: 0.912236750125885

 $00:19:12.356 \longrightarrow 00:19:13.740$ that have demonstrated viral

NOTE Confidence: 0.912236750125885

 $00{:}19{:}13.797 \dashrightarrow 00{:}19{:}15.717$ particles within endothelial cells.

NOTE Confidence: 0.912236750125885

 $00:19:15.720 \rightarrow 00:19:18.060$ Not every study has demonstrated that,

NOTE Confidence: 0.912236750125885

 $00{:}19{:}18{.}060 \dashrightarrow 00{:}19{:}20{.}780$ but some people do believe that that is

NOTE Confidence: 0.912236750125885

 $00:19:20.780 \longrightarrow 00:19:23.682$ part of the incipient process that begins NOTE Confidence: 0.912236750125885

00:19:23.682 --> 00:19:26.619 the end of filial pattern of injury.

NOTE Confidence: 0.912236750125885

 $00{:}19{:}26.620 \dashrightarrow 00{:}19{:}28.960$ One of the challenges is that.

NOTE Confidence: 0.912236750125885

 $00{:}19{:}28{.}960 \dashrightarrow 00{:}19{:}30{.}710$ A lot of people tend to think

NOTE Confidence: 0.912236750125885

 $00{:}19{:}30{.}710 \dashrightarrow 00{:}19{:}32{.}410$ of thrombosis as somewhat later

NOTE Confidence: 0.912236750125885

00:19:32.410 --> 00:19:33.748 event occuring clinically,

NOTE Confidence: 0.912236750125885

 $00:19:33.750 \longrightarrow 00:19:36.603$ so it's not clear if there may be a

NOTE Confidence: 0.912236750125885

00:19:36.603 --> 00:19:39.486 second sort of hit to the end of Filium,

NOTE Confidence: 0.912236750125885

00:19:39.490 --> 00:19:39.800 particularly,

NOTE Confidence: 0.912236750125885

 $00:19:39.800 \rightarrow 00:19:41.350$ patients become critically ill that

NOTE Confidence: 0.912236750125885

 $00:19:41.350 \rightarrow 00:19:43.319$ might be independent of viral infection.

NOTE Confidence: 0.912236750125885

 $00{:}19{:}43{.}320 \dashrightarrow 00{:}19{:}44{.}980$ It might instead involve inflammation

NOTE Confidence: 0.912236750125885

 $00{:}19{:}44{.}980 \dashrightarrow 00{:}19{:}46{.}988$ and other things like compliment that

NOTE Confidence: 0.912236750125885

 $00:19:46.988 \rightarrow 00:19:48.740$ might trigger and a filial activation.

NOTE Confidence: 0.91236799955368

 $00:19:50.150 \longrightarrow 00:19:51.778$ Thank you other questions

NOTE Confidence: 0.91236799955368

 $00{:}19{:}51.778 \dashrightarrow 00{:}19{:}53.406$ that have come through.

NOTE Confidence: 0.91236799955368

 $00{:}19{:}53{.}410 \dashrightarrow 00{:}19{:}55{.}570$ Do you have any information about

- NOTE Confidence: 0.91236799955368
- 00:19:55.570 00:19:57.528 the specificity of these changes
- NOTE Confidence: 0.91236799955368
- $00:19:57.528 \longrightarrow 00:19:59.803$ for chobit relative to other
- NOTE Confidence: 0.91236799955368
- $00:19:59.803 \rightarrow 00:20:01.168$ respiratory viral infections?
- NOTE Confidence: 0.91236799955368
- $00:20:01.170 \longrightarrow 00:20:02.945$ For instance, are microvascular thrombi
- NOTE Confidence: 0.91236799955368
- $00{:}20{:}02{.}945 \dashrightarrow 00{:}20{:}05{.}285$ a finding in in other respiratory
- NOTE Confidence: 0.91236799955368
- $00:20:05.285 \rightarrow 00:20:07.289$ viral infections beyond coated?
- NOTE Confidence: 0.91236799955368
- 00:20:07.290 --> 00:20:08.100 Yeah, that's
- NOTE Confidence: 0.91236799955368
- $00{:}20{:}08.100 \dashrightarrow 00{:}20{:}11.084$ a good question to my knowledge I I'm
- NOTE Confidence: 0.91236799955368
- $00{:}20{:}11.084 \dashrightarrow 00{:}20{:}14.573$ not aware of a lot of other viruses
- NOTE Confidence: 0.91236799955368
- $00:20:14.573 \longrightarrow 00:20:16.670$ that show microvascular thrown by.
- NOTE Confidence: 0.91236799955368
- $00:20:16.670 \rightarrow 00:20:18.986$ There are certain cases of influenza
- NOTE Confidence: 0.91236799955368
- $00{:}20{:}18.986 \dashrightarrow 00{:}20{:}21.129$ that can be characterized by
- NOTE Confidence: 0.91236799955368
- $00:20:21.129 \rightarrow 00:20:22.719$ massive inflammatory responses.
- NOTE Confidence: 0.91236799955368
- 00:20:22.720 --> 00:20:24.616 Um dangi infection is also often
- NOTE Confidence: 0.91236799955368
- $00:20:24.616 \rightarrow 00:20:26.874$ brought up as an example of a
- NOTE Confidence: 0.91236799955368

 $00:20:26.874 \rightarrow 00:20:28.728$ virus that can cause a pretty

NOTE Confidence: 0.91236799955368

00:20:28.728 --> 00:20:30.530 awful coagulopathic picture,

NOTE Confidence: 0.91236799955368

 $00{:}20{:}30{.}530 \dashrightarrow 00{:}20{:}33{.}160$ so I'm not sure if any of either of those

NOTE Confidence: 0.91236799955368

 $00:20:33.227 \rightarrow 00:20:35.857$ in particular are classically associated.

NOTE Confidence: 0.91236799955368

00:20:35.860 --> 00:20:37.630 Microvascular phone by or not,

NOTE Confidence: 0.91236799955368

00:20:37.630 --> 00:20:40.045 but I'm not aware of a lot

NOTE Confidence: 0.91236799955368

 $00:20:40.045 \longrightarrow 00:20:41.889$ of other viruses that are.

NOTE Confidence: 0.86891633272171

 $00:20:43.320 \rightarrow 00:20:45.966$ And then another question do that?

NOTE Confidence: 0.86891633272171

00:20:45.970 --> 00:20:48.090 Does the Coagulopathy correlate

NOTE Confidence: 0.86891633272171

 $00:20:48.090 \rightarrow 00:20:51.180$ with the static on storm? Yeah,

NOTE Confidence: 0.876762747764587

 $00:20:51.180 \rightarrow 00:20:53.826$ so that's a great question Stewart.

NOTE Confidence: 0.876762747764587

 $00:20:53.830 \rightarrow 00:20:56.338$ So one of the interesting experiments

NOTE Confidence: 0.876762747764587

 $00{:}20{:}56{.}338 \dashrightarrow 00{:}20{:}58{.}836$ that that Young Chun started to

NOTE Confidence: 0.876762747764587

 $00:20:58.836 \rightarrow 00:21:01.461$ do with our patient samples is to

NOTE Confidence: 0.876762747764587

 $00:21:01.461 \rightarrow 00:21:03.999$ examine different proteomic profiles,

NOTE Confidence: 0.876762747764587

 $00:21:04.000 \longrightarrow 00:21:06.210$ and so we're starting to

- NOTE Confidence: 0.876762747764587
- $00:21:06.210 \longrightarrow 00:21:08.420$ get that data back now,
- NOTE Confidence: 0.876762747764587
- $00{:}21{:}08{.}420 \dashrightarrow 00{:}21{:}11{.}507$ and the hope is to see mechanistically,
- NOTE Confidence: 0.876762747764587
- $00:21:11.510 \rightarrow 00:21:14.582$ if any of the changes inside a current
- NOTE Confidence: 0.876762747764587
- $00{:}21{:}14.582 \dashrightarrow 00{:}21{:}17.645$ profiles that that are shown do correlate
- NOTE Confidence: 0.876762747764587
- 00:21:17.645 --> 00:21:20.830 with robotic risk or endothelial dysfunction.
- NOTE Confidence: 0.876762747764587
- $00:21:20.830 \longrightarrow 00:21:23.196$ One of the challenges we have in
- NOTE Confidence: 0.876762747764587
- 00:21:23.196 --> 00:21:25.097 trying to interpret our data fully
- NOTE Confidence: 0.876762747764587
- $00:21:25.097 \rightarrow 00:21:27.400$ is that as most of you guys know,
- NOTE Confidence: 0.876762747764587
- $00{:}21{:}27{.}400 \dashrightarrow 00{:}21{:}29{.}290$ pretty much every critically ill patient
- NOTE Confidence: 0.876762747764587
- $00:21:29.290 \rightarrow 00:21:31.216$ in the hospital with kovid receives
- NOTE Confidence: 0.876762747764587
- 00:21:31.216 --> 00:21:33.344 totalism AB before they reach the ICU,
- NOTE Confidence: 0.876762747764587
- $00:21:33.350 \rightarrow 00:21:35.534$ which is an interleukin six receptor blocker,
- NOTE Confidence: 0.876762747764587
- $00{:}21{:}35{.}540 \dashrightarrow 00{:}21{:}37{.}780$ and so there may be some effects of
- NOTE Confidence: 0.876762747764587
- $00{:}21{:}37.780 \dashrightarrow 00{:}21{:}39.763$ Totalism app not only on Coagulo pathy
- NOTE Confidence: 0.876762747764587
- $00:21:39.763 \longrightarrow 00:21:41.797$ but also on the sideline profile,
- NOTE Confidence: 0.876762747764587

 $00:21:41.800 \rightarrow 00:21:43.642$ and so we're trying to figure

NOTE Confidence: 0.876762747764587

 $00:21:43.642 \longrightarrow 00:21:45.240$ out how to interpret that.

NOTE Confidence: 0.879934728145599

 $00{:}21{:}46.610 \dashrightarrow 00{:}21{:}49.186$ Another question for patients on on a

NOTE Confidence: 0.879934728145599

 $00:21:49.186 \rightarrow 00:21:51.378$ ventilator for other causes of a RDS,

NOTE Confidence: 0.879934728145599

 $00:21:51.380 \longrightarrow 00:21:53.085$ do they have elevated levels

NOTE Confidence: 0.879934728145599

00:21:53.085 --> 00:21:54.790 of one willebrand factor? Yeah,

NOTE Confidence: 0.879934728145599

 $00:21:54.790 \rightarrow 00:21:56.500$ even that's a fantastic question,

NOTE Confidence: 0.879934728145599

 $00:21:56.500 \rightarrow 00:21:59.232$ and so the answer is yes, sort of,

NOTE Confidence: 0.879934728145599

 $00{:}21{:}59{.}232 \dashrightarrow 00{:}22{:}01{.}960$ but not not quite to the same level.

NOTE Confidence: 0.879934728145599

 $00{:}22{:}01{.}960 \dashrightarrow 00{:}22{:}05{.}020$ So in the literature there's a lot of other.

NOTE Confidence: 0.879934728145599

 $00{:}22{:}05{.}020 \dashrightarrow 00{:}22{:}07{.}732$ There's a few other diseases that are known

NOTE Confidence: 0.879934728145599

 $00:22:07.732 \longrightarrow 00:22:10.480$ to have very bad end of Philly Opathy,

NOTE Confidence: 0.879934728145599

 $00:22:10.480 \longrightarrow 00:22:12.502$ one of them being severe DIC

NOTE Confidence: 0.879934728145599

 $00:22:12.502 \rightarrow 00:22:14.932$ with septic shock and VOD or SOS

NOTE Confidence: 0.879934728145599

 $00:22:14.932 \longrightarrow 00:22:16.617$ in transplant is another one.

NOTE Confidence: 0.879934728145599

00:22:16.620 --> 00:22:18.668 Um, and in fact a RDS is known

 $00{:}22{:}18.668 \dashrightarrow 00{:}22{:}20.893$ to also be characterized by NFL

NOTE Confidence: 0.879934728145599

 $00:22:20.893 \rightarrow 00:22:23.359$ dysfunction as somewhat of a control.

NOTE Confidence: 0.879934728145599

 $00:22:23.360 \longrightarrow 00:22:25.887$ We separately worked with the ICU to

NOTE Confidence: 0.879934728145599

 $00:22:25.887 \rightarrow 00:22:27.672$ measure von Willebrand factor levels

NOTE Confidence: 0.879934728145599

 $00{:}22{:}27.672 \dashrightarrow 00{:}22{:}30.216$ in non kovid ICU patients who are into

NOTE Confidence: 0.879934728145599

 $00{:}22{:}30{.}284 \dashrightarrow 00{:}22{:}32{.}510$ baited and in those patients we did

NOTE Confidence: 0.879934728145599

 $00:22:32.510 \rightarrow 00:22:34.210$ see elevated von Willebrands levels,

NOTE Confidence: 0.879934728145599

 $00:22:34.210 \longrightarrow 00:22:36.800$ but we did not see a consistently

NOTE Confidence: 0.879934728145599

 $00:22:36.800 \longrightarrow 00:22:38.773$ super high level of unrelated factor

NOTE Confidence: 0.879934728145599

 $00:22:38.773 \longrightarrow 00:22:41.657$ like we do in code and so we do

NOTE Confidence: 0.879934728145599

 $00:22:41.657 \rightarrow 00:22:43.257$ think there's some specificity to

NOTE Confidence: 0.879934728145599

 $00{:}22{:}43{.}257 \dashrightarrow 00{:}22{:}44{.}928$ this particular Cove in response.

NOTE Confidence: 0.864825069904327

00:22:45.660 --> 00:22:48.198 Makes sense since the last question

NOTE Confidence: 0.864825069904327

 $00{:}22{:}48.198 \dashrightarrow 00{:}22{:}50.955$ from Stuart is you compared ICU

NOTE Confidence: 0.864825069904327

00:22:50.955 --> 00:22:53.415 versus non ICU versus controls?

 $00:22:53.420 \rightarrow 00:22:55.676$ What about these values in comparing

NOTE Confidence: 0.864825069904327

 $00{:}22{:}55.676 \dashrightarrow 00{:}22{:}57.180$ patients with throm botic complications?

NOTE Confidence: 0.864825069904327

 $00:22:57.180 \longrightarrow 00:22:58.680$ For those without cloths,

NOTE Confidence: 0.903968393802643

 $00:22:58.680 \rightarrow 00:23:00.936$ yes Sir, that's a fantastic question.

NOTE Confidence: 0.903968393802643

 $00:23:00.940 \longrightarrow 00:23:03.022$ You know, one of the challenges

NOTE Confidence: 0.903968393802643

 $00:23:03.022 \rightarrow 00:23:05.449$ that we have at our hospital,

NOTE Confidence: 0.903968393802643

 $00:23:05.450 \longrightarrow 00:23:08.075$ and this is not unique to us,

NOTE Confidence: 0.903968393802643

 $00:23:08.080 \longrightarrow 00:23:10.204$ is that because of concerns about

NOTE Confidence: 0.903968393802643

 $00:23:10.204 \rightarrow 00:23:12.220$ excess health care worker exposure,

NOTE Confidence: 0.903968393802643

 $00:23:12.220 \longrightarrow 00:23:14.095$ it's not been routine for

NOTE Confidence: 0.903968393802643

 $00{:}23{:}14.095 \dashrightarrow 00{:}23{:}15.595$ covert patients at Yale.

NOTE Confidence: 0.903968393802643

00:23:15.600 --> 00:23:17.480 New Haven Hospital to get

NOTE Confidence: 0.903968393802643

 $00:23:17.480 \longrightarrow 00:23:18.984$ imaging to confirm thrombosis.

NOTE Confidence: 0.903968393802643

 $00:23:18.990 \rightarrow 00:23:21.622$ If you guys recall in the Cove

NOTE Confidence: 0.903968393802643

 $00:23:21.622 \rightarrow 00:23:22.750$ at anticoagulation algorithm,

NOTE Confidence: 0.903968393802643

 $00:23:22.750 \longrightarrow 00:23:23.476$ we said anybody.

- NOTE Confidence: 0.903968393802643
- $00{:}23{:}23{.}476 \dashrightarrow 00{:}23{:}25{.}612$ Any patient in whom one suspects a Venus
- NOTE Confidence: 0.903968393802643
- $00{:}23{:}25.612 \dashrightarrow 00{:}23{:}27.562$ Roman Bolic event should automatically
- NOTE Confidence: 0.903968393802643
- $00:23:27.562 \longrightarrow 00:23:28.732$ start photos anticoagulation.
- NOTE Confidence: 0.903968393802643
- $00{:}23{:}28{.}740 \dashrightarrow 00{:}23{:}30{.}780$ The reason we added that in there is
- NOTE Confidence: 0.903968393802643
- $00{:}23{:}30{.}780 \dashrightarrow 00{:}23{:}32{.}591$ because most patients are not getting
- NOTE Confidence: 0.903968393802643
- $00{:}23{:}32{.}591 \dashrightarrow 00{:}23{:}34{.}463$ imaging to tell whether they really
- NOTE Confidence: 0.903968393802643
- $00{:}23{:}34{.}520 \dashrightarrow 00{:}23{:}36{.}290$ have a Venus throm boembolic event.
- NOTE Confidence: 0.903968393802643
- $00:23:36.290 \longrightarrow 00:23:37.832$ Therefore we don't really have a
- NOTE Confidence: 0.903968393802643
- $00{:}23{:}37{.}832 \dashrightarrow 00{:}23{:}39{.}777$ good idea of how many patients in
- NOTE Confidence: 0.903968393802643
- 00:23:39.777 --> 00:23:41.505 our own hospital system and which
- NOTE Confidence: 0.903968393802643
- 00:23:41.505 --> 00:23:43.270 ones actually have a thrombotic
- NOTE Confidence: 0.903968393802643
- $00:23:43.270 \longrightarrow 00:23:45.045$ complication and which ones don't,
- NOTE Confidence: 0.903968393802643
- $00{:}23{:}45.050 \dashrightarrow 00{:}23{:}48.344$ so I can't answer that based on our data.