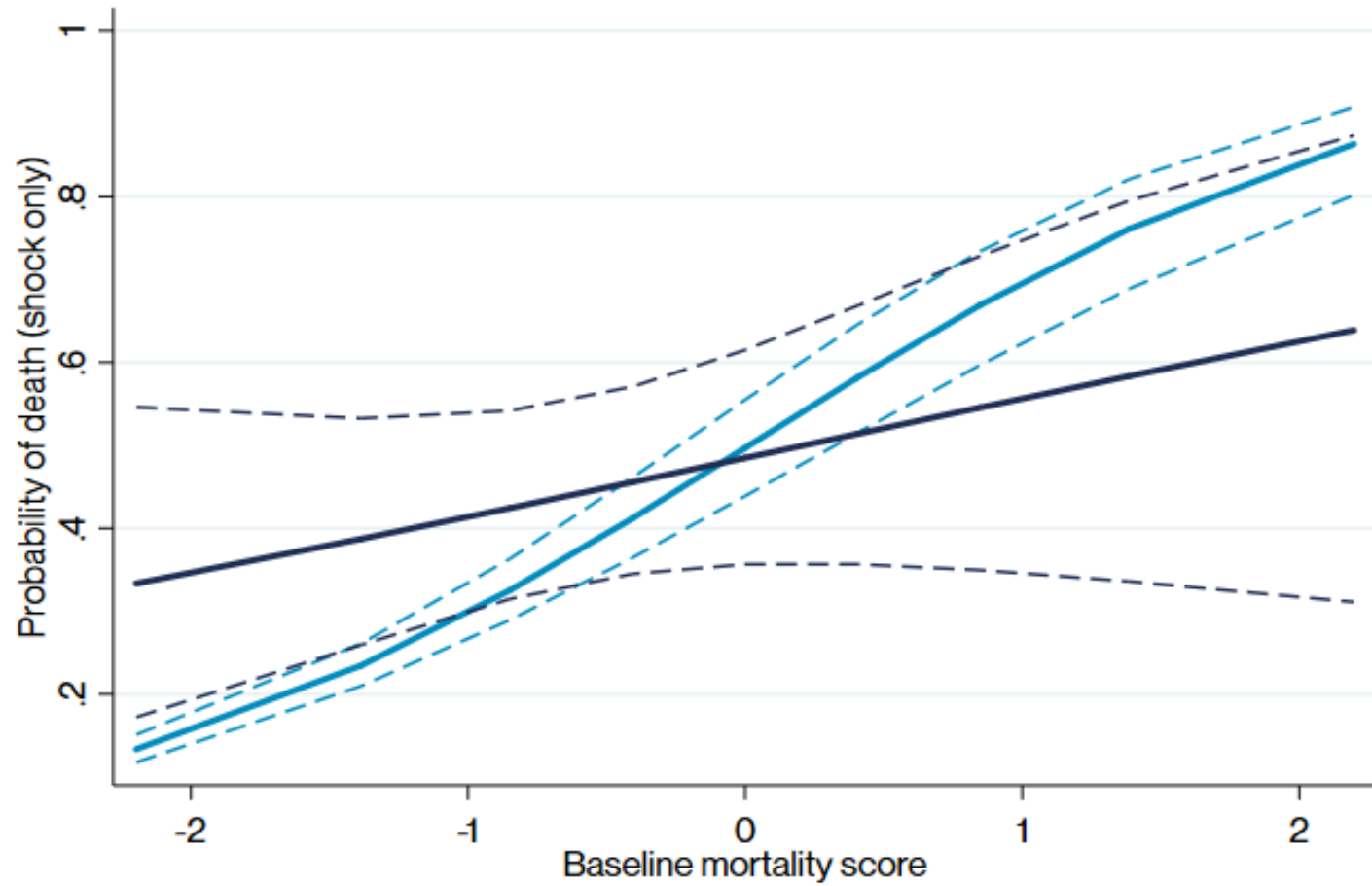


**Additional File 6: Sensitivity analysis to estimating treatment benefit for children with septic shock treated with Extracorporeal life support (ECMO, n=80) versus controls (n=2347), restricted to patients coded as septic shock in the ANZPIC registry.** The marginal mean for estimated mortality is shown (y-scale) versus the baseline mortality score (x-scale) for children treated with ECMO (dark blue line) versus controls (light blue line). Full lines indicate the effect estimate, dashed lines indicate 95%-confidence intervals. The benefit threshold, defined as the baseline risk for which ECMO became beneficial reflects the intersection of both lines with is at 47.7% predicted risk of mortality (95% CI: 17.4%-93.6%). The predicted mortality risk is adjusted for covariates on respiratory failure (PaO<sub>2</sub>/FiO<sub>2</sub> ratio, intubation, treatment with HFOV), cardiovascular (arterial hypotension, cardiac arrest pre ICU admission), metabolic (high lactate), Central Nervous System (dilated pupils), and renal (need for renal replacement) dysfunction, and underlying immunosuppression.



— Baseline — ECMO