CHANGE ONE THING

INTRODUCING THERANOVA FOR
EXPANDED HEMODIALYSIS [HDx]

CHANGE EVERYTHING
The problem

Conventional/large middle-molecules are linked to chronic inflammation, cardiovascular disease (CVD), secondary immunodeficiency, erythropoietin resistance, symptom burden and other dialysis related comorbidities.\textsuperscript{1-4}

Accumulation of these uremic toxins result in elevated concentrations in patients with Kidney Failure (KF), and may cause adverse biologic effects.\textsuperscript{1}

~50\% of patients with KF die from CVD\textsuperscript{8}

Traditional high-flux membranes have limited ability to remove conventional and large middle molecular uremic toxins (up to 45,000 Da).\textsuperscript{1,4-6}

Accumulation of conventional/large middle molecules may contribute to disease burden in kidney failure patients\textsuperscript{1,2}

In a National Kidney Foundation (NKF) online survey, majority of patients (n=359) receiving in-center hemodialysis reported experiencing interdialytic symptoms:\textsuperscript{9}

62\% of patients feel fatigued/washed out 40\% of patients report 4+ hours of recovery time 6\% of patients skipped a dialysis session

These QoL symptoms were severe and correlated with longer recovery time following hemodialysis, as well as shortened and skipped hemodialysis sessions.\textsuperscript{9}
THE SOLUTION

The Theranova MCO membrane’s unique design includes a tight pore size distribution, with increased nominal pore size and pore density that delivers a steep sieving curve resulting in higher permeability for uremic toxins (up to 45,000 Da), while selectively retaining endotoxins/essential proteins and maintaining stable albumin levels.¹,⁴,¹⁰

The minimized diameter (180 microns) of the Theranova membrane enhances internal filtration expanding solute removal, creating a stable separation profile and selectivity throughout treatment.¹⁰

HDx ENABLED BY THERANova:
ONE STEP CLOSER TO THE NATURAL KIDNEY

THE THERANOVA PAES/PVP ASYMMETRICAL AND POROUS MEMBRANE HAS THREE DISTINCT LAYERS

- Higher Permeability
- Selectivity
- Retention
- Enhanced Internal Filtration

THERANOVA 4 KEY DIFFERENTIATORS

Performance Characteristics of Various Blood Filtration Membranes

The selective layer is the most important layer of the membrane including the permeability profile.

CVD is associated with inflammation, atherosclerosis, and calcification. Approximately 50% of patients with kidney failure (KF) die from CVD.

Conventional/large middle molecular (500-45,000 Da) uremic toxins have been linked to the development of inflammation, cardiovascular disease (CVD) and other dialysis-related comorbidities.

HDx therapy may improve patient-reported kidney disease quality of life (QoL) outcomes including symptom burden, restless leg syndrome (RLS) criteria uremic pruritus and dialysis recovery time.

The unique design of the Theranova membrane delivers superior removal of conventional/large middle molecules (up to 45,000 Da) compared to high-flux membranes, while selectively retaining essential proteins and maintaining stable albumin levels.

In a retrospective analysis (n=81), HDx therapy showed a significant reduction in hospital days and in-center medication usage. An observational study (n=41) showed an improvement in certain inflammatory markers in select patients.

HDx therapy may improve patient-reported kidney disease quality of life (QoL) outcomes including symptom burden, restless leg syndrome (RLS) criteria uremic pruritus and dialysis recovery time.

Theranova, the next evolution in hemodialysis (HD) brings us a step closer to the natural kidney by expanding clearance of conventional/large middle molecules (up to 45,000 Da) linked to inflammation and CVD, compared to traditional HD.

Simply change the dialyzer membrane to expand clearance and CHANGE EVERYTHING for your patients.

For more details contact your Baxter representative or visit https://hemodialysis.baxter.com/HDx
REFERENCES:


8. Aoki J, Ikari Y, Cardiovascular Disease in Patients with End-Stage Renal Disease on Hemodialysis, Ann Vasc Dis Vol 10, No 4; 2017; 327-337.


The Theranova Dialyzer is indicated for patients with chronic kidney failure who are prescribed intermittent hemodialysis. It provides an expanded solute removal profile with increased removal of various middle and large molecules (up to 45 kDa) that may play a pathologic role in the uremic clinical syndrome. The Theranova Dialyzer is not intended for hemofiltration or hemodiafiltration therapy. The total extracorporeal blood volume for the Theranova Dialyzer and the set should represent less than 10% of the patient’s blood volume.

For Single Use Only

Rx Only. For safe and proper use of these devices refer to the Instructions for Use.

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