

Theranova 500

DESIGNED FOR:

HDx

MEMBRANE:

MCO [PAES/PVP, BPA-free]

HDx THERAPY ENABLED BY THERANOVA

The HDx therapy (expanded HD) is the next evolution in hemodialysis, as it effectively targets the removal of large middle molecules.¹ Indeed, many of them are linked to the development of inflammation, cardiovascular disease, and other co-morbidities in dialysis patients.² Not only can HDx therapy provide HDF performance and beyond in the removal of conventional middle and large middle molecules, it does so using regular HD workflow and infrastructure.³

The HDx therapy is enabled by the **Theranova*** dialyzer series, featuring an innovative membrane design that combines a higher permeability than regular high-flux dialyzers with effective selectivity for large proteins.^{4,5}

HDF PERFORMANCE AND BEYOND, AS SIMPLE AS HD³

- Markedly greater clearances and intradialytic reduction ratios for middle molecules than regular HD – at ordinary blood flow rates
- Equivalent removal of small and conventional middle molecules to high-volume HDF – Greater removal possible for large middle molecules
- Controlled albumin removal to between 1 and 4 grams per session³
- Compatible with any HD monitor^{6,7} and with standard dialysis

WITH BAXTER'S LATEST DIALYZER INNOVATION, COMING CLOSER TO THE NATURAL KIDNEY^{4,5}

- High permeability to large middle molecules
- Effective selectivity by size exclusion
- Augmented internal filtration
- Similar retention of endotoxins as other dialysis membranes of the same material⁸



* Do not use **Theranova** dialyzers in HDF or HF mode

Theranova 500 Specifications

| MATERIALS | THERANOVA 500 |
|-----------------|---|
| Membrane | Medium Cut Off Polyarylethersulfone and Polyvinylpyrrolidone blend BPA-free |
| Potting | Polyurethane (PUR) |
| Housing | Polycarbonate (PC) |
| Gaskets | Silicone rubber (SIR) |
| Protection caps | Polypropylene (PP) |
| Sterilization | Steam (inside-out) |
| Sterile barrier | Tyvek |

SPECIFICATIONS

| | |
|---|------------------|
| UF-Coefficient (mL/h*mmHg)* | 59 |
| KoA urea* | 1630 |
| Blood Compartment volume (mL) | 105 |
| Minimum recommended priming volume (mL) | 300 |
| Maximum TMP (mmHg) | 600 |
| Recommended Q _B (mL/min) | 250-600 |
| Storage conditions | <30°C (or <86°F) |
| Units per box | 24 |
| Gross/net weight (g) | 246/190 |

MEMBRANE

| | |
|---|-----|
| Effective Membrane Area (m ²) | 2.0 |
| Fiber inner diameter (µm) | 180 |
| Fiber wall thickness (µm) | 35 |

SIEVING COEFFICIENTS*

| | |
|--|-------|
| Vitamin B12 (1,4 kDa) | 1.0 |
| Inulin (5,2 kDa) | 1.0 |
| β ₂ -microglobulin (11,8 kDa) | 1.0 |
| Myoglobin (17 kDa) | 0.9 |
| Albumin (66,4 kDa) | 0.008 |

* According to EN 1283/ISO 8637:

- UF-Coefficient: measured with bovine blood, Hct 32%, Pct 60g/L, 37°C
- KoA urea: calculated at Q_B=300 mL/min, Q_D=500mL/min, UF=0 mL/min
- Sieving coefficients: measured with human plasma, Q_B=300 mL/min, UF=60 mL/min
- Clearances In-Vitro: measured at UF=0 mL/min, ±10%

| CLEARANCES IN VITRO (mL/min)* | THERANOVA 500 |
|---|---------------|
| Urea (60 Da) (Q_B-Q_D, mL/min) | |
| 200/500 | 199 |
| 300/500 | 285 |
| 400/500 | 351 |
| 400/800 | 381 |
| 500/800 | 454 |
| Phosphate (95 Da) | |
| 200/500 | 194 |
| 300/500 | 267 |
| 400/500 | 320 |
| 400/800 | 354 |
| 500/800 | 413 |
| Creatinine (113 Da) | |
| 200/500 | 196 |
| 300/500 | 274 |
| 400/500 | 331 |
| 400/800 | 365 |
| 500/800 | 428 |
| Vitamin B12 (1.4 kDa) | |
| 200/500 | 169 |
| 300/500 | 215 |
| 400/500 | 249 |
| 400/800 | 280 |
| 500/800 | 317 |
| Inulin (5.2 kDa) | |
| 200/500 | 139 |
| 300/500 | 170 |
| 400/500 | 193 |
| 400/800 | 216 |
| 500/800 | 241 |
| Cytochrome C (12 kDa) | |
| 200/500 | 128 |
| 300/500 | 155 |
| 400/500 | 175 |
| 400/800 | 196 |
| 500/800 | 217 |
| Myoglobin (17 kDa) | |
| 200/500 | 110 |
| 300/500 | 130 |
| 400/500 | 147 |
| 400/800 | 163 |
| 500/800 | 180 |

1. Ronco C, et al. *The rise of Expanded Hemodialysis*. Blood Purif 2017; 44:1-VIII.
2. Hutchison CA, et al. *The Rationale for Expanded Hemodialysis Therapy (HDx)*. Contrib Nephrol 2017; 191:142-52.
3. Kirsch AH, et al. *Performance of hemodialysis with novel medium cut-off dialyzers*. Nephrol Dial Transpl 2017; 32(1):165-72.
Data was obtained with TH400 and may be applied to TH500 due to similarities in membrane and design.
4. Boschetti-de-Fierro A, et al. *MCO membranes: Enhanced Selectivity in High-Flux Class*. Scientific Reports 2015; 5:18448.
5. Zweigart C, et al. *Medium cut-off membranes – closer to the natural kidney removal function*. Int J Artif Organs 2017; 40(7):328-334.
6. Baxter. Data on file. *Theranova Limited Controlled Distribution Report*. 2016.
7. Baxter. *Theranova 400/500 Instructions For Use*. N50 648 rev 003, 2017-05-29.
8. Schepers E, Glorieux G, Elout S, et al. *Assessment of the association between increasing membrane pore size and endotoxin permeability using a novel experimental dialysis simulation set-up*. BMC Nephrology. 2018; 19:1.

For further information
visit hdxtheranova.com:



The products meet the applicable provisions of Annex I (Essential Requirements) and Annex II (Full quality assurance system of the Council Directive 93/42/EEC of 14 June 1993, amended by Directive 2007/47/EC)

For safe and proper use of the device, please refer to the Instructions for Use

CE 0086