

Evodial

DESIGNED FOR:

OTHER APPLICABLE THERAPIES:

MEMBRANE: HFHD (High flux) CONVECTIVE (HDF-HF, AFB-K) HEPRAN (heparin-grafted AN69 ST, BPA-free)

SPECIALIZED FOR HIGH BLEEDING RISK PATIENTS

The Evodial* dialyzer series is specialized for patients with a high risk of bleeding.^{1,2} It has been designed with the HeprAN heparingrafted membrane,^{3,4} and provides a convenient solution for patients requiring reduced or even heparin-free dialysis.^{1,5}

FOCUSED ON HEPARIN-FREE DIALYSIS

- May increase the rate of successful heparin-free HD therapy sessions, compared to the current standard of care for high bleeding risk patients¹
- May allow reduced systemic heparin dosing, without compromising the dialysis sessions^{4,6,7}
- Study data indicate that no significant amount of heparin is released from the membrane during a dialysis session⁸

WITH ENHANCED CONVENIENCE^{1,5}

- May reduce nurse workload and disposable consumption
- This could result in a lower use of healthcare resources, compared to standard heparin-free dialysis
- Polyvalent dialyzer design, which can accomodate standard hemodialysis, but also convective therapies (hemodiafiltration and hemofiltration), as well as acetate-free-biofiltration (AFB-K, with potassium profile)

The images are for illustration purposes only and may differ from the actual product.

* Do not use Evodial in patients with a known allergy to heparin or type II thrombocytopenia caused by heparin (HIT syndrome type II)

Evodial Specifications

	EVODIAL 1.0		EVODIAL 1.6		
PRODUCT CODE	110654A	110653A	110652A	110651A	
MATERIALS					
Membrane	HeprAN (heparin-grafted AN69 ST) :				
		Acrylonitrile and Sodium methallyl sulfonate			
	copolymer	copolymer + polyethyleneimine surface treatment			
	+ heparin grafted				
Potting	BPA-free Polyurethane (PUR)				
Housing	Polycarbonate (PCK)				
Protection caps	· · · · · · · · · · · · · · · · · · ·				
r rotection caps	Polyethylene (PE): Blood caps (HDPE)/Dialysate caps (LDPE)				
Sterile barrier	PET/Aluminium/PE				
SPECIFICATIONS					
UF-Coefficient (mL/(h•mmHg))*	29	37	45	56	
KoA urea*	494	611	691	780	
Blood compartment volume (mL)	69	83	101	130	
Minimum recommended		1(וחח		
priming volume (mL)	1000				
Maximum TMP (mmHg)		4	50		
Recommended Q_B (mL/min)	150-400	200-400	200-500	200-500	
Units per box	24 units per box				
Net weight (g)	168	191	229	269	
Sterilization	Gamma irradiation				
Storage conditions	+4°C to +30°C				
Shelf life	2 years				
MEMBRANE					
Effective Membrane Area (m²)	1.05	1.30	1.65	2.15	
Fiber inner diameter (µm)	210				
Fiber wall thickness (µm)	45.5				
SIEVING COEFFICIENTS					
Creatinine (113 Da)	1				
Inulin (5.2 kDa)	1				

CLEARANCES IN VITRO (mL/min)*	EVODIAL 1.0	EVODIAL 1.3	EVODIAL 1.6	EVODIAL 2.2
Urea (60 Da) (Q _B /Q _D , mL/min)				
200/500	169	176	183	187
300/500	210	223	237	246
400/500	236	253	272	285
500/500			297	312
Creatinine (113 Da)				
200/500	150	159	168	174
300/500	180	193	209	220
400/500	199	215	236	249
500/500			255	271
Phosphate (142 Da)				
200/500	128	138	149	156
300/500	149	162	179	190
400/500	162	178	198	212
500/500			212	228
Vitamin B12 (1.4 kDa)				
200/500	79	87	98	106
300/500	86	97	110	120
400/500	91	103	118	130
500/500			125	137

INTENDED PURPOSE⁹

Evodial dialyzers are intended to purify blood in hemodialysis, hemodiafiltration and hemofiltration.

INDICATION⁹

Evodial dialyzers are indicated for the treatment of chronic or acute renal failure.

CONTRAINDICATIONS⁹

It is contra-indicated to use the Evodial dialyzers for patients presenting a known allergy to heparin or having type II thrombocytopenia caused by heparin (HIT Syndrome type II).

NOTF⁹

Evodial dialyzers are for use in adult patients.

Creatinine (113 Da)	1
Inulin (5,2 kDa)	1
Myoglobin (117 kDa)*	0.63
Albumin (66,4 kDa)*	0.003

* According to ISO 8637-1

- UF-Coefficient: measured with bovine blood, Hct 32%, Pct 60g/L, 37°C, QB=300 mL/min, TMP=100 mmHg - KoA urea: calculated at $\rm Q_{g}$ =300 mL/min, $\rm Q_{D}$ =500mL/min, UF=0 mL/min

- Clearances In-Vitro: measured at UF=0 mL/min, 37±1°C

- Sieving coefficients: Creatinine, Inulin measured with Evodial 2.2 in anticoagulated bovine plasma, QB=300 mL/min, UF=60mL/min;

Myoglobin, Albumin measured with Evodial 2.2 in anticoagulated human plasma, QB=300 mL/min, UF=60mL/min

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

 Laville M, et al. Results of the HepZero study. Kidne 	y Int 2014; 86:1260-1267.
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- Kessler M, et al. Anticoagulation in chronic hemodialysis: progress toward an optimal approach. Semin Dial 2015; 28:474-489. 2
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- Kessler M, et al. Heparin-grafted dialysis membrane allows minimal systemic anticoagulation in regular hemodialysis patients: A prospective proof-of-concept study. 4. Hemodial Int 2013; 17:282-293.
- Meijers B, et al. A noninferiority trial comparing a heparin-grafted membrane plus citrate-containing dialysate versus regional citrate anticoagulation: results of the CiTED study. 5
- Nephrol Dial Transplant. 2017; 32(4):707-714.
- Morena M, et al. Biocompatibility of heparin-grafted hemodialysis membranes: Impact on monocyte chemoattractant protein-1 circulating level and oxidative status. Hemodialysis 6. International 2010; 14:403-410.
- Frascá GM, et al. Post-Dilution Hemodiafiltration With a Heparin-Grafted Polyacrylonitrile Membrane. Ther Apher Dial 2015; 19:154-161.
- Baxter. Data on File. Evodial heparin leaching data. Study report BM10-008.

9 Evodial instruction for use

The products comply with relevant General Safety and Performance Requirements (GSPRs) of ANNEX I of Regulation [EU] 2017/745 of the European Parliament and of the Council of 5 April 2017 (Medical Device Regulation, MDR).

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Notified body: TÜV SÜD Product Service GmbH, Germany Medical device of class III.

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Gambro Industries 7, Avenue Lionel Terray 69883 Meyzieu Cedex France

renalcare.baxter.com

Baxter Healthcare Corporation One Baxter Parkway Deerfield, IL 60015 USA 1-800-422-9837