

Evodial

DESIGNED FOR: **HFHD** (High flux) OTHER APPLICABLE THERAPIES:

MEMBRANE: **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

PRODUCT CODE	EVODIAL 1.0 110654A	EVODIAL 1.3	EVODIAL 1.6	EVODIAL 2.2
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MATERIALS				
Membrane	HeprAN (heparin-grafted AN69 ST) : Acrylonitrile and Sodium methallyl sulfonate			
	copolymer + polyethyleneimine surface treatment + heparin grafted			
			-free	
Potting	Polyurethane (PUR)			
Housing		Polycarbonate (PC)		
Protection caps	Polyethylene (PE): Blood caps (HDPE)/Dialysate caps (LDPE)			
				(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	1000			
priming volume (mL)		1000		
Maximum TMP (mmHg)		450		
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 (m ²)	1.05	1.30	1.65	2.15
Fiber inner diameter (µm)	210			2.15
Fiber wall thickness (µm)	45.5			
niber watt thickness (phi)		4,		
SIEVING COEFFICIENTS				
Creatinine (113 Da)			1	

CLEARANCES IN VITRO (mL/min)* EVODIAL 1.0 EVODIAL 1.3 EVODIAL 1.6 EVODIAL 2.2

Urea (60 Daj (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)					Ī
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.

CONTRAINDICATIONS?

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 (17 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 Q_B =300 mL/min, 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. Kidney Int 2014; 86:1260-1267.
- Kessler M, et al. Anticoagulation in chronic hemodialysis: progress toward an optimal approach. Semin Dial 2015; 28:474-489.
- Thomas M, et al. AN69: Evolution of the world's first high permeability membrane AN69: Evolution of the world's first high permeability membrane. Contrib Nephrol 2011; 173:119-129. 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.
- 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
- 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.

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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