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BAXTER CANADA LAUNCHES HDx THERAPY ENABLED BY THERANOVA TO HELP SET NEW STANDARDS OF CARE FOR DIALYSIS PATIENTS

- Expanded hemodialysis (HDx) therapy enabled by THERANOVA is designed to closely mimic the natural kidney function through clearance of small to large middle molecules during dialysis
- Studies show expanded hemodialysis (HDx) therapy removes middle molecular weight uremic toxins with minimal albumin loss
- THERANOVA dialyzer works with all standard hemodialysis equipment without the need for replacement fluid such as in hemodiafiltration (HDF)

MISSISSAUGA, ON - November 27, 2017 — Today, Baxter Canada, an innovator in renal care, launched HDx enabled by THERANOVA, a new therapy for hemodialysis (HD) patients that has the potential to set a new standard of renal care for the greater than 20,000 hemodialysis patients in Canada.^{1,2} Due to low or non-existent kidney function, end-stage renal disease (ESRD) patients retain large amounts of different toxins, such as mid-sized and large molecules that are not well removed by current hemodialysis filters and may contribute to inflammation and cardiovascular risk^{3,4,5}. This is especially significant since many ESRD patients have existing co-morbidities that put them at higher risk of cardiovascular events and premature death.

Baxter's HDx therapy enabled by THERANOVA was designed to filter a wider range of molecules from the blood than conventional hemodialysis filters, including those mid-sized molecular weight uremic toxins.^{3,4,5} By extending the range of molecules that can be filtered from the blood, HDx results in a clearance profile that more closely mimics the natural kidneys.⁶ HDx is performed the same way as conventional hemodialysis (HD), does not require generation of replacement fluid and works on standard equipment for operational efficiencies.

"The introduction of HDx enabled by THERANOVA provides an opportunity for Canadian healthcare providers to offer a new treatment option to their hemodialysis patients that is easy to perform and may very well become standard of care in the future," said Dr. Marc Dorval, MD, MPH, MBA, PhD(c), FRCPC, Nephrologist, Dr. Georges-L.-Dumont University Hospital Centre.

In a previous study published in <u>Nephrology Dialysis Transplantation</u>, researchers found that HDx enabled by the THERANOVA dialyzer can exceed the performance of other types of



dialysis, including high flux hemodialysis and high-volume hemodiafiltration (HDF) for specific large middle molecules, with acceptable albumin removal.⁷

Patients have recently been enrolled in new clinical trials in the United States and Colombia that will evaluate effectiveness, safety and health-related quality of life associated with HDx therapy enabled by THERANOVA.

"Baxter has been a leader in renal care in Canada for over 60 years and we continue to invest and strive for innovation that helps healthcare providers set new standards of care." said Stephen Thompson, President, Baxter Canada.

THERANOVA dialyzers are indicated for treatment of chronic renal failure by hemodialysis. **For prescription only**. For safe and proper use of THERANOVA, refer to the Instructions For Use.

About Baxter Canada

For 80 years, Baxter has been making a meaningful difference for healthcare providers and patients in Canada. Baxter Corporation and its nearly 1,000 employees are located primarily in Ontario at the Head Office, CIVA Admixing and Technical Services Centres in Mississauga, and in Alliston – where Baxter operates Canada's only large scale manufacturing plant producing life-sustaining intravenous and dialysis solutions. These and other essential Baxter products, including anesthesia, biosurgery, dialysis and ICU equipment, infusion pumps, parenteral nutrition, and ready-to-administer intravenous admixtures play a vital role in the care of patients across Canada.

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¹ Canadian Institute for Heath Information. Canadian Organ Replacement Register Annual Report: Treatment of End-Stage Organ Failure in Canada, 2004 to 2013. Ottawa, ON: CIHI;2014.

² Canadian Institute for Health Information. Canadian Organ Replacement Register Annual Report: Treatment of End-Stage Organ Failure in Canada, 2006 to 2015.Ottawa, ON: CIHI;2016.

³ Chmielewski et al. *The Peptidic Middle Molecules: Is Molecular Weight Doing the Trick?* Sem Nephrol 2014;34:118-34.

⁴ Neirynck N, et al. *An update on uremic toxins*. Int Urol Nephrol. 2013;45:139-50.

⁵ Duranton F, et al. *European Uremic Toxin Work Group. Normal and pathologic concentrations of uremic toxins.* J Am Soc Nephrol. 2012 Jul;23(7):1258-70.

⁶ Boschetti-de-Fierro A, et al. *MCO membranes: Enhanced Selectivity in High-Flux Class.* Scientific Reports (2015);5: 18448

⁷ Kirsch AH, et al. *Performance of hemodialysis with novel medium cut-off dialyzers.* Nephrol Dial Transplant. 2017;32:165-172.