

ON-SITE home hemodialysis with NxStage

A differentiated service for your residents requiring dialysis



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Resident injury and discomfort due to inclement weather

Potential Challenges of Off-Site Dialysis¹ **2** Expensive transportation costs

Disruption to resident care schedules (rehab, medications, meals, & activities)

Communication breakdowns in the coordination of care

Resident may be too sick for transport

Shortcomings of Conventional 3x Per Week Hemodialysis Treatments

Of your residents in need of dialysis, many may struggle with abrupt hemodynamic changes that come with conventional treatments, performed 3 days per week at a dialysis clinic. The high ultrafiltration rates of conventional treatments increase the risk of cardiovascular and all-cause mortality.²

In addition, conventional hemodialysis is associated with longer treatment recovery time³ and lower energy⁴. As a result, residents may miss scheduled rehabilitation or other medical appointments, negatively impacting their health and your facility.

A more patient-centric care model is needed.

Dialysis Frequency Matters

Residents performing home hemodialysis in a Skilled Nursing Facility more frequently, have shown **improvements in both survival⁵ and hospitalizations⁶.** In addition, patients in the general population performing treatments more frequently have reported, and studies confirm, clinical and quality of life improvements including:



LESS RISK OF CARDIAC-RELATED HOSPITALIZATIONS⁷



IMPROVED POST-DIALYSIS RECOVERY TIME³



MORE ENERGY & VITALITY⁴



REDUCED
ANTIHYPERTENSIVE
MEDICATIONS⁸



IMPROVED APPETITE⁹



IMPROVED SURVIVAL¹⁰

More frequent therapy, when medically necessary, along with eliminating transportation may help your residents maintain schedules for:



REHABILITATION



MEDICATIONS



MEDICAL APPOINTMENTS



MEALS

On-site home hemodialysis may also help your facility *differentiate* its services, potentially *growing resident census*¹.

Advantages of the NxStage system

Benefits of the NxStage system compared to conventional hemodialysis equipment:

- Minimal plumbing and electrical wiring changes required
- Eliminates risk and maintenance of RO water treatment
- Lower utility costs[†]
- Smaller treatment space

In-center water calculations based on 500 mL/min DFR, 220 minute treatment, 109 L of dialysate per treatment, 3 treatments per week. This simulation uses a 3:1 ratio for R0 systems. Home hemodialysis calculations based on 190 mL/min DFR, 30 L, 158 minute treatment, 30L of dialysate per treatment, 5 treatments per week. This simulation uses a 1:1 ratio for DI systems.



16 MILLION TREATMENTS

Visit www.nxstage.com/snf for more information

RISKS & RESPONSIBILITIES

Despite the health benefits that more frequent home hemodialysis may provide to those with chronic kidney disease, this form of therapy is not for everyone.

The reported benefits of home hemodialysis may not be experienced by all patients.

The NxStage System One is a prescription device and, like all medical devices, involves some risks. The risks associated with hemodialysis treatments in any environment include, but are not limited to, high blood pressure, fluid overload, low blood pressure, heart-related issues, and vascular access complications. The medical devices used in hemodialysis therapies may add additional risks including air entering the bloodstream, and blood loss due to clotting or accidental disconnection of the blood tubing set. When vascular access is exposed to more frequent use, infection of the site, and other access related complications may also be potential risks. Patients should consult with their doctor to understand the risks and responsibilities of home and/or more frequent hemodialysis using the NxStage System One.

Patients and providers are encouraged to contact their state regulators to discuss state-specific regulations that may impact dialysis in the Skilled Nursing Facility setting.

References: 1. Data on File. NxStage Medical, Inc. Health Advances Interviews. May 2013. Based on interviews with 5 facilities. 2. Flythe JE, Kimme SE, Brunelli SM. Rapid fluid removal during dialysis is associated with cardiovascular morbidity and mortality. Kidney Intl. 2011;79(2):250-257. 3. Jaber BL, Lee Y, Collins AJ, et al. Effect of daily hemodialysis on depressive symptoms and post dialysis recovery time: interim report from the FREEDOM (Following Rehabilitation, Economics and Everyday-Dialysis Outcome Measurements) Study. Am J Kidney Dis. 2010;56(3):531-539 4. Finkelstein FO, Schiller B, Daoui R, et al. At-home short daily hemodialysis improves the long-term health-related quality of life. Kidney Int. 2012;82(5): 561-569. 5. Yang A, Lee WY, Hocking K, Xelay Acumen, Inc., Affiliated Dialysis. Survival comparison of daily home hemodialysis vs conventional dialysis in the nursing home setting. Nephrology News & Issues. February 17 2015. 6. Bednar B. Improving Kidney Care for Residents in Nursing Facilities: A National Model. Nephrol News Issues. 2016:30-34. 7. Eric D. Weinhandl, Kimberly M. Nieman, MS, David T. Gilbertson, PHD, Allan J Collins, MD. Hospitalization in Daily Home Hemodialysis and Matched Thrice-Weekly In-Center Hemodialysis Patients. Am J Kidney Dis., Published Online: July 29, 2014. 8. FHN Trial Group. In-center hemodialysis on nutrition. Am J Kidney Dis. 2003;42(1 suppl):30-35. 10. Weinhandl ED, Liu J, Gilbertson DT, Ameson TJ, Collins AJ. Survival in daily home hemodialysis and matched thrice-weekly in-center hemodialysis patients. JASN. 2012;23(5);895-904. doi:10.1681/ASN.2011080761. 11. Data on File. NxStage Medical, Inc. Patient Data.

