투석막 하나를 변경하여 **혈액투석 치료 결과들의 많은 부분을 바꿀 수 있습니다.**[10]

CHANGE ONE THING.

중/대분자(500-45,000 Da) 요독소는 염증, 심혈관질환(Cardiovascular disease, CVD) 및 기타 투석 관련 동반 질환의 발생과 관련이 있습니다.[1-3]

50%

심혈관질환은 염증, 죽상동맥 경화증 및 석회화와 연관성이 있습니다. 신부전(Kidney failure) 환자의 약 50%가 심혈관질환으로 사망합니다.[4-6]

High-Flux

기존의 고유량 투석막은 중/대분자 요독소 (최대45,000 Da)의 제거에 제한적 입니다.[7]

CHANGE EVERYTHING.

Theranova 투석막의 차별화된 디자인은 고유량 투석막에 비해 중/대분자 (최대 45,000 Da)를 효과적으로 제거하는 동시에 필수 단백질을 선택적으로 유지하고 알부민 수치를 안정적으로 유지합니다.[2,3,8-10,12,13]

후향적 분석(n=81) 결과, HDx 요법은 입원 일수 및 센터 내 약제 사용을 크게 감소시켰습니다.[14] 무작위 대조 연구 (n=171)에서 all-cause hospitalization이 43% 감소한 것으로 나타났습니다.[15] 일부 환자에서는 특정 염증 지표의 개선이 관찰되었습니다(n=41).[16]

HDx 요법은 환자의 증상부담, 하지불안증후군(Restless leg syndrome), 요독성 소양증 (Uremic pruritus) 및 투석 회복 시간 등 환자가 보고한 신질환 관련 삶의 질 결과를 개선할 수 있습니다.[8,9,17,18]

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서울시 종로구 종로 1 교보생명빌딩 10층 1001호 대표전화 : 02-6262-7100

Baxter