S³ monitor

S³

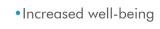
DAILY HEMODIALYSIS THE CHOICE OF INDEPENDENCE





A BETTER QUALITY OF LIFE

Physidia has designed the S^3 monitor to help dialysis patients to regain quality of life and independence.



- Reduced recovery time
- More free time
- •Increased independence















AN EXPERT DEDICATED TO THE NEEDS OF THE PATIENT

Since its creation, Physidia has made innovation and service a priority for the patient's comfort, freedom and security.

Simplicity of use

- Compact and ergonomic monitor
- Interactive and mobile touchscreen
- Ready to use monitor
- Intuitive installation
- Treatment flexibility
- Easy to transport

Security, at every treatment

- Patient card with secured medical prescription
- Sterile dialysate solutions
- Record of dialysis data at each session

Services on daily basis

- PhysiTravel : The holidays solution
- Technical hotline
- Training materials and tools

The S³ monitor is a medical device delivered upon prescription. Your nephrologist is your primary contact to discuss of available treatments and answers to your illness. Do not hesitate to contact them to discuss daily hemodialysis treatment at home.



MAIN CLINICAL BENEFITS OF FREQUENT HEMODIALYSIS

Quality of life



Quality of life (SF36) 📊 🗷

Recovery time after dialysis session [11]

Cardiovascular system



Hypertension [2,3] Antihypertensive treatment [2] Left ventricular hypertrophy[4,5]

Phospho-calcic metabolism



Phosphorus [6,7] Chelators dose

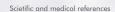
Nutritional status



Nutritional and mineral intake [8]

Albuminemia [9,10]





[1] Patients receiving frequent hemodiolysis have better health-related quality of life compared to patients receiving conventional hemodiolysis, A. X.Garg et al., Kidney Int. 2017, 91, 746-754. [2] Volume control and blood pressure management in patients undergoing quotidian hemodiolysis, G.Nesrallah et al, Am. J. Kidney Dis. 2003, Jul;42(1Suppl):13-7. [3] Effect of Frequent or Extended Hemodiolysis on Cardiovascular Parameters: A Meta-analysis R Susantitaphong et al., J. Kidney Dis. 2012, May; 59[5]: 689-699; 4] In-Center Hemodiolysis Six Times per Week versus Three Times per Week, G. M. Chertov et al, N. Fingl J Med 2010;5363:2287-300. [5] Determinants of Left Ventricular Mass in Patients on Hemodiolysis Six Hemodiolysis Network (FHN) Trials, C.T. Chan et al, Circ Cardiovasc Imaging, 2012, March 1; 5(2): 251-261. [6] The role of daily dialysis in the control of hyperphosphatemia, G. Steven et al, Kidney International, 2005,Vol. 67, Supplement 95, pp. 528-532. [7] Short daily hemodiolysis a sassociated with lower plasma FGF32 less when compared with conventional hemodiolysis, J. Zaritsky et al, Nephrol Dial Transplant. 2014, 29: 437-441. [8] Short daily hemodiolysis repidly improves nutritional status in hemodiolysis potents. R. Galland et al, Kidney International, Vol. 60 (2001), pp. 1555-1560. [9] Clinical and biochemical correlates of starting "daily" hemodiolysis, J. D. Woods et al, Kidney International, Vol. 55 (1979), pp. 2467-2476. [10] Low flux dialysate daily home hemodiolysis: A result for the 62 first French and Belgian patients, A. Benabed et al, Néphrologie & Thérapeutique, 13, (2017), 18-25.



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