



## HeRO<sup>®</sup> Patient Selection Considerations

HeRO<sup>®</sup> is a fully subcutaneous system that provides reliable, continuous blood flow directly from a target artery to the central venous system and into the heart. HeRO has no venous anastomosis because the tip of the outflow component is located in the mid to upper right atrium. HeRO is FDA classified as a graft, and is cannulated like a conventional ePTFE graft.

HeRO candidates are those patients with central venous stenosis (CVS) or venous outflow obstruction that are:

- Catheter-dependent or approaching catheter-dependency
- Failing fistulas or grafts
- Unable to achieve prescribed flow rates
- Unable to achieve adequacy of dialysis (KDOQI target clearance = 1.4 Kt/V)

However, as with conventional grafts, HeRO may occlude in patients with:

- A small brachial artery (e.g., ID less than 3mm)
- Insufficient arterial inflow or inflow stenosis
- A history of clotted accesses for unknown reasons
- A coagulability disorder or medical condition that is associated with clotting (i.e., cancer)
- Insufficient anticoagulation or non-compliance with anticoagulation medication
- Systemic low blood pressure or severe hypotension following fluid removal post dialysis
- A kinked graft
- Incomplete thrombus removal in previous interventions
- Intra-graft stenosis at site of multiple punctures
- An event such as mechanical compression (i.e., spring loaded hemostasis clamps)

Thrombosis is the most common cause of vascular access dysfunction. Missed hemodialysis sessions significantly increase the number of thrombosis episodes in AVFs and AVGs.<sup>1</sup> HeRO thrombosis rates are comparable to conventional grafts and are treated with similar methods.<sup>2</sup> Refer to the Thrombectomy Guidelines brochure for additional information at <http://www.heroaccess.com/procedures-physicians/declot-procedure-physicians>.

**For additional information, please refer to the HeRO Instructions for Use or contact Hemosphere Customer Service at 888.313.8233.**

### References:

1. Shah, Ravish. 2010. Impact of Missing Hemodialysis sessions on Arteriovenous Access Thrombosis. On file at Hemosphere, Inc.
2. HeRO Clinical Trial Data. On file at Hemosphere, Inc.