

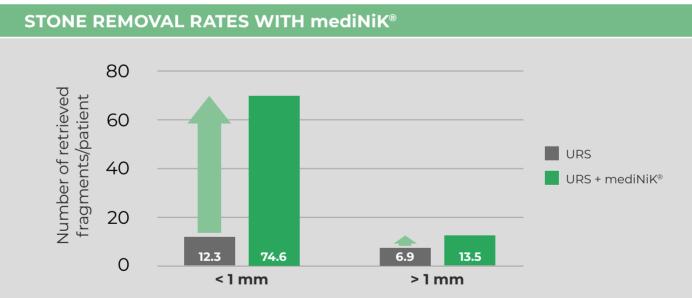
# mediNiK® – An innovative hydrogel for removal of kidney stone fragments following lithotripsy

# WHY ARE SMALL RESIDUAL FRAGMENTS (RF) AND A STONE-FREE RATE OF 100% RELEVANT?

- Nearly half of all stone fragments after lithotripsy are < 1 mm and therefore cannot be grasped<sup>1</sup>
- In 60% of patients with RFs < 1 mm there was no complete passage of the RFs after 2 years and in 18% an increase in size of the RFs<sup>2</sup>
- 20% of patients with RFs < 4 mm require an intervention within 20 months and there is no significant difference in the disease progression rate between patients with small (< 4mm) and large (> 4 mm) RFs<sup>3</sup>

Small fragments should be removed completely and a stone-free rate of 100% should be reached to reduce the rate of recurrence. To date these have been difficult to grasp.

## How does mediNiK® support the goal of stone-free status?



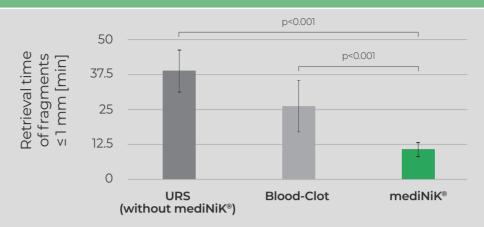
These results are from a non-published clinical investigation study. The study is an open-label, prospective, randomized multicenter study. It was conducted in the period from 09-2021 to 09-2022 in 5 investigation sites in Germany (Asklepios Klinik Barmbek (Hamburg), Universitätsklinikum Münster (Muenster), Krankenhaus der Barmherzigen Brüder (Trier), Klinikum rechts der Isar (Munich), and Marienhaus Klinikum (Ahrweiler)). 59 patients with kidney stones > 5mm were either treated with URS with laser lithotripsy and stone fragmentation (dusting and pop-dusting) alone or additionally with mediNiK<sup>®</sup>.4

With mediNiK® fragments < 1 mm can be grasped and removed more effectively compared with URS alone.4



# Advantages of mediNiK® compared to blood-clot method

### COMPARISON OF RETRIEVAL TIMES OF FRAGMENTS ≤ 1 MM\*\*



<sup>\*\*</sup>An ex vivo pig kidney model was used in which 30 kidney stone fragments ≤ 1 mm were introduced. Not all fragments could be retrieved in 40% of the experiments in the URS alone group and they were stopped after 45 min.<sup>5</sup>

With mediNiK® fragments < 1 mm can be retrieved significantly faster.5

#### COMPARISON OF BLOOD-CLOT METHOD WITH mediNiK®6

	Blood-Clot methode	mediNiK®
	Blood-clot Illetilode	medinin
Effectiveness of retrieval	<b>✓</b>	<b>✓</b>
Rapid clot/gel formation	_	<b>✓</b>
Good vision	_	<b>✓</b>
Removal of residual clot/gel by diuresis	_	<b>✓</b>

#### mediNiK® is superior to the blood-clot method.



Small fragments (< 1 mm) can be grasped.4



Small fragments are retrieved efficiently.4



Superior to the blood-clot method.<sup>5,6</sup>



#### SOURCES -

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