PreSep Oximetry Catheter

The security of an early warning
The PreSep oximetry catheter. The proactive decision.

In the critically ill, traditional vital signs may be late indicators of compromised or inadequate oxygen delivery to the tissues. By providing a real-time, global measure of oxygen balance, the PreSep oximetry catheter detects critical changes earlier—enabling you to detect and prevent tissue hypoxia sooner.1-5

Continuous ScvO₂ monitoring is key to assessing the adequacy of the balance of oxygen delivery and consumption. The goal of continuous ScvO₂ monitoring with the PreSep oximetry catheter is to bring into balance the relationship between oxygen delivery and consumption to improve the care of high-acuity patients.6

Convenient, accurate and easy to use

- The first proven central venous catheter with continuous ScvO₂ monitoring
- Accurate versus CO-oximeter7
- Simple to use—same insertion techniques as that of a central line
The proven advantage of continuous ScvO₂ monitoring.

Continuous ScvO₂ monitoring is proven to reduce mortality, comorbidities, hospital costs and length of stay when compared to intermittent sampling. The prognostic value of ScvO₂ has been demonstrated in high-risk surgery, trauma, sepsis, cardiac failure in CHF, and recovery in cardiac arrest.10,11

• Continuous ScvO₂ is a more sensitive indicator of tissue perfusion compared to intermittent sampling and traditional vital signs alone.16
• Continuous ScvO₂ monitoring reveals the true adequacy of tissue oxygenation, enabling early detection and assessment of clinical response to intervention.1,2
• Continuous ScvO₂ highly correlates and trends with SvO₂ while providing the same utility in monitoring, which is essential in defining the adequacy of cardiac output.12

Advantages of Continuous ScvO₂

Outcomes using continuous central venous oxygen saturation versus standard central venous catheters in sepsis management.

• Reduction in total hospital charges of $82,262 per case
• Decrease in hospital length of stay by 7.48 days

Source: Comparison of continuous central venous oxygen saturation and standard central venous catheters in septic patients at a large, non-academic tertiary medical center. Crit Care Med. 2009;37(12) (suppl).14

Decrease in patient mortality rate

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<th>Continuous ScvO₂ monitoring</th>
<th>Intermittent monitoring</th>
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<tbody>
<tr>
<td>Mortality rate</td>
<td>26.5%</td>
<td>38.7%</td>
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Increase in patients reaching six-hour goal

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<th>Continuous ScvO₂ monitoring</th>
<th>Intermittent monitoring</th>
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<tr>
<td>Patients</td>
<td>75.7%</td>
<td>60.3%</td>
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Source: Effect of intermittent vs. continuous ScvO₂ monitoring on sepsis bundle compliance and mortality. Am Coll Chest Physicians. 2009.15

The PreSep oximetry catheter, from Edwards Lifesciences. The security of an early warning. For clarity, in every moment.

Clinical applications of ScvO₂

ScvO₂ and SvO₂ are affected by the same four factors and trend together more than 90% of the time. Thus, most of the research and clinical applications documented for SvO₂ should apply to ScvO₂. Figure 1 provides examples of clinical situations where ScvO₂ monitoring may be helpful in identifying imbalances between DO₂ and VO₂.13
Helping to advance the care of the critically ill for 40 years, Edwards Lifesciences seeks to provide the valuable information you need, the moment you need it. Through continuing collaboration with you, ongoing education and our never-ending quest for advancement, our goal is to deliver clarity in every moment.

Visit www.Edwards.com/PreSep to learn more

CAUTION: Federal (USA) law restricts this device to sale by or on the order of a physician. See instructions for use for full prescribing information.

For professional use. For additional information, indications, contraindications, warnings, precautions and adverse events, please refer to the Instructions For Use provided with the products.

References:


*PreSep Oligon oximetry catheters contain an integrated Oligon antimicrobial material. The activity of the antimicrobial material is localized at the catheter surfaces and is not intended for treatment of systemic infections. In vitro testing demonstrated that the Oligon material provided broad-spectrum effectiveness (≥3 log reduction from initial concentration within 48 hours) against the organisms tested: Staphylococcus aureus, Staphylococcus epidermidis, Klebsiella pneumoniae, Enterococcus faecalis, Candida albicans, Escherichia coli, Stenotrophomonas maltophilia, Enterobacter cloacae, Enterobacter aerogenes, Pseudomonas aeruginosa, Candida glabrata and VRE (Enterococcus faecium).

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