



The Smart, Simple Solution for Patients



NxStage® systems offer the most individualized HHD therapy options to meet patients' unique clinical and lifestyle needs.

During the Day, With a Care Partner

Similar to in-center hemodialysis, but done more frequently, from the comfort of your home. More frequent hemodialysis may lead to improved health and quality of life outcomes compared to traditional, 3-times-per-week, in-center therapy.¹

Greater Flexibility and Freedom to Travel

NxStage systems are the only HHD machines weighing less than 80 pounds, making them the most portable HHD cyclers for those who love to travel—or during non-medical emergencies or natural disasters.

SCHEDULE FLEXIBILITY



PORTABLE



NOCTURNAL

Overnight While You and Your Care Partner Sleep

Similar to daytime HHD but done overnight with longer and slower treatments. More frequent nocturnal HHD is closer to the fluid and toxin removal of a healthy kidney.¹



SOLO

During Waking Hours, Without a Care Partner

Solo HHD allows for greater control and ownership of care, increased independence with more treatment flexibility, and the feeling of being less reliant on friends and family.

TALK WITH YOUR CARE TEAM ABOUT THE HHD TREATMENT OPTIONS AVAILABLE WITH A NXSTAGE SYSTEM

Discover what therapy option might be best for you!

Patients should review the following information carefully and discuss it with their doctors to decide whether home hemodialysis with NxStage systems is right for them.

Users should weigh the risks and benefits of performing home hemodialysis with NxStage systems.

- Medical staff will not be present to respond to health emergencies that might happen during home treatments.
- Users and their care partners will be responsible for all aspects of their hemodialysis treatments from start to finish.
- Users may not experience the reported benefits of home, more frequent, or nocturnal hemodialysis with the NxStage systems.
- The NxStage systems require a prescription for use.

Certain forms of home hemodialysis have additional risks.

- If a doctor prescribes home hemodialysis more than 3 times a week, vascular access is exposed to more frequent use, which may lead to access-related complications, including infection of the site. Doctors should evaluate the medical necessity of more frequent treatments and discuss the risks and benefits of more frequent therapy with users.
- If a doctor prescribes "solo/independent" home hemodialysis without a care partner during waking hours, risks of significant injury or death increase because no one is present to help users respond to health emergencies. If users experience needles coming out, blood loss, or very low blood pressure during solo/independent home hemodialysis, they may lose consciousness or become physically unable to correct the health emergency. Users will need additional ancillary devices and training to perform solo/independent home hemodialysis.
- If a doctor prescribes "nocturnal" home hemodialysis at night while the user and a care partner are sleeping, risks increase due to the length of treatment time and because therapy is performed while the user and a care partner are sleeping. These risks include, among other things, blood access disconnects and blood loss during sleep, blood clotting due to slower blood flow or increased treatment time or both, and delayed response to alarms when waking from sleep. A doctor may need to adjust users' medications for nocturnal home hemodialysis, including, among other things, iron, Erythropoiesis-Stimulating Agents (ESA), insulin/oral hypoglycemics, anticoagulants, and phosphate binders.