

Introduction

- Acute kidney injury (AKI) is a common complication of severe trauma, and it is critical for these patients to have rapid access to dialysis treatment to improve their likelihood of survival
- Future near-peer conflicts will render evacuation from theatre impossible or impractical (the standard of care in recent conflicts)
- Battlefield hospitals often do not have access to the large volumes of dialysate required for treatment (up to 100 L/patient per day)
- To avoid the high logistical cost of shipping aqueous solutions to battlefield locations and to ensure that access to dialysate is not interrupted during combat operations, it would be preferable to produce dialysate on-demand in the field using locally available water sources
- TDA is developing two light weight devices to produce dialysate ondemand using locally available potable or non-potable water sources
- A non-powered device for austere, power-limited environments
- An electrically powered, automated device with reduced energy consumption and size/weight compared to existing dialysate production equipment (funded by USAMRDC through an MTEC MPAI award)

Discussion

 Demonstrations have been performed with our collaborators at USU, Dr. Ian Stewart and Dr. **David Burmeister**



- End user feedback from USU will be incorporated into the design (e.g., updates to the labeling to make operation intuitive)
- Swine model studies are planned to begin at USU in Fall 2023 to compare dialysate produced on **TDA's device with commercial Fresenius** dialysate (RFP 402) in AKI models

Target Composition of TDA's Dialysate

Dialysate Compound Composition 140 Na⁺ (mmol/L) K⁺ (mmol/L) 0 1.5 Ca²⁺ (mmol/L) 0.5 Mg²⁺ (mmol/L) 109 Cl⁻ (mmol/L) 35 HCO_3^- (mmol/L) Acetate (mmol/L) 0 Glucose (g/L)





On-Demand, Portable Dialysate Generator Girish Srinivas, PhD, MBA; <u>gsrinivas@tda.com</u>; 303-940-2321 Ned Metcalf, James McNamara, Alan Tabuyo, Taylor Ott, Cory Van Beek *TDA Research, Inc., Golden, CO **Methods and Materials Results** Ion testing shows that TDA's system can produce dialysate that meets the target ion composition Sheet metal housing with • TDA is conservatively targeting a 4% margin of error around the target (dashed clearly labeled valves and line) ports • For comparison, the USP acceptable margin for Multiple Electrolytes Injection (an injectable drug with much stricter standards) is 10% 25:1 reduction in shipped liquid volume (40 mL of Demonstrated chlorine and chloramine removal using activated carbon injection to make 1 L of in accordance with ANSI/AAMI RD62 standards dialysate) Demonstrated production with local river water and with brackish water Samples System is designed to work Demonstrated sterile production Control with both potable and nonpotable water sources と110 E 106 Produces 1 L of dialysate in < 10 minutes (144 L/day) Depends on operating conditions such as feed water 3 4 5 6 7 temperature and salinity **Results from 7 L of production for sodium and chloride** non-sterile control The solid lines show the 4% and the dashed lines show the target Conclusion About TDA In Business for over 30 years Business Model Portable devices for on-demand dialysate production will Privately held dramatically reduce the logistical burden of providing - 130 employees, 30 Ph.D.'s in – Perform R&D treatment for AKI chemistry/engineering Secure intellectual property - Over \$30 million in annual revenue TDA's system reduces the shipped volume of fluid by ~95%, Commercialize technology via Facilities: Combined 78,000 sq. ft. massively reducing the logistical burden to provide dialysis o spin-offs near Denver, CO o licensing care joint ventures **Core capabilities** • internal business units TDA has completed an initial cGMP prototype production Prototype development, Medical device run with our manufacturing partner, Fort Defiance Industries design, Catalyst testing, Sorbents, Materials (FDI) processing and testing, Process development • TDA has submitted a pre-submission package to the FDA **Time Analysis** Medical Oxygen Generation System, referred to as the



Uniformed Services University

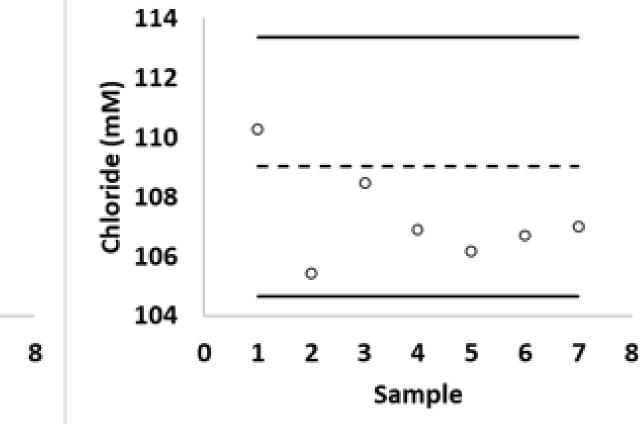
Dialysate will be produced into 5L bags (Liberty Cycler Drain Set) and sodium bicarbonate will be added via syringe shortly before use to avoid precipitation



TDA Research, Inc. Proprietary

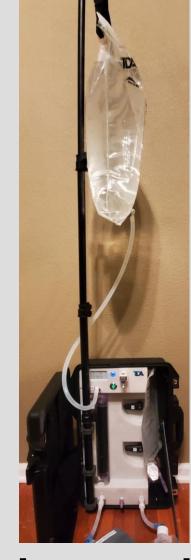
Bridge Hemodialysis Unit for Trauma Care



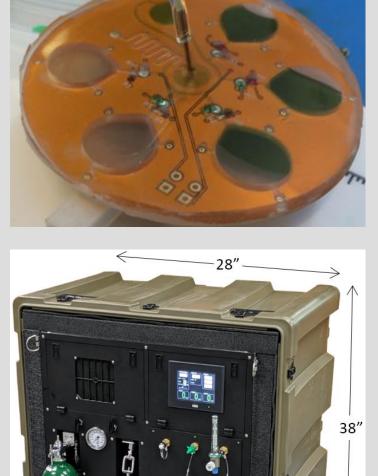


- Identify opportunities with industry





Lactated **Ringer's** Solution Generator



Flexible Smart Sweat Sensor Patch for Real-

Expeditionary Portable Oxygen Generation System (EPOGS)



14-day sterility incubations with a