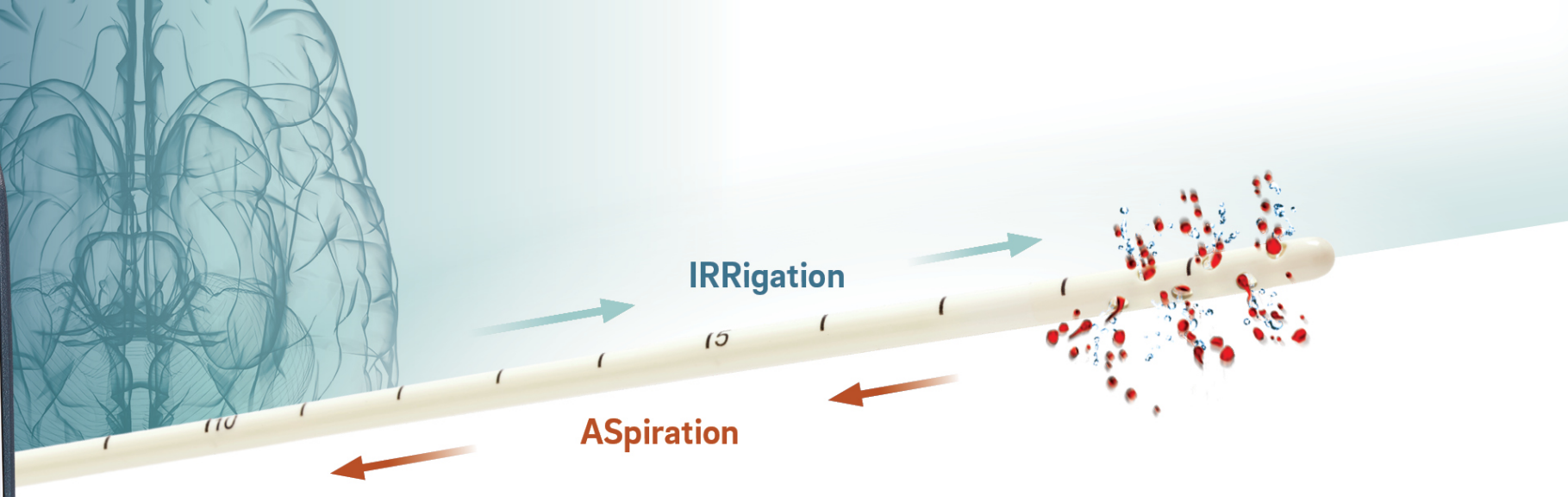




Case Experience Library



Introducing Active Fluid Exchange

See What is Possible with a Proactive, Therapeutic Approach

Table of Contents

- Intraventricular Hemorrhage
- Chronic Subdural Hematoma
- Ventriculitis

Intraventricular Hemorrhage



Intraventricular Hemorrhage

Male,
18 Years Old

PATHOLOGY TREATED

Intraparenchymal and Intraventricular Hemorrhage due to Hypertension

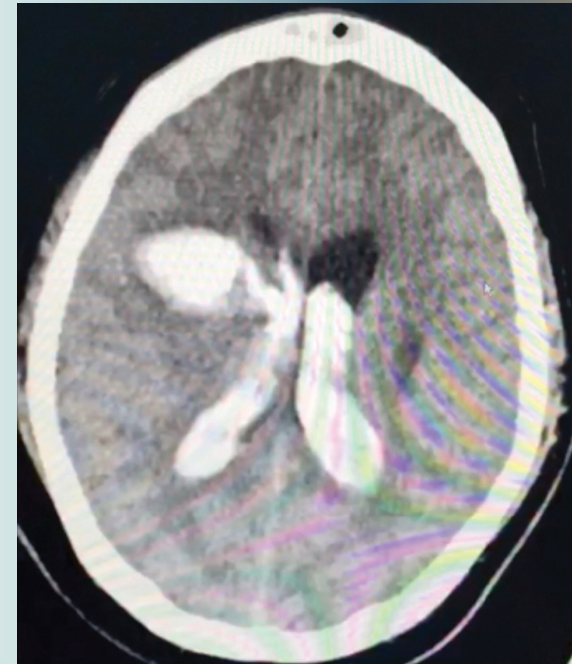
TREATMENT DESCRIPTION

- IRRAflow Catheter Probe inserted
- Active Fluid Exchange performed for 27 total hours

TREATMENT RESULT

- Patient stabilized, returned to regular ward, discharged to rehab
- No drainage occlusions seen
- No infection seen

Treatment Time – 27 Hours



Pre-IRRAflow Treatment



Post-IRRAflow Treatment



Chronic Subdural Hematoma



Chronic Subdural Hematoma

Male,
85 Years Old



PATHOLOGY TREATED

Intraparenchymal and Intraventricular Hemorrhage due to Hypertension



TREATMENT DESCRIPTION

- IRRAflow Catheter Probe inserted
- Active Fluid Exchange performed for 6.5 total hours



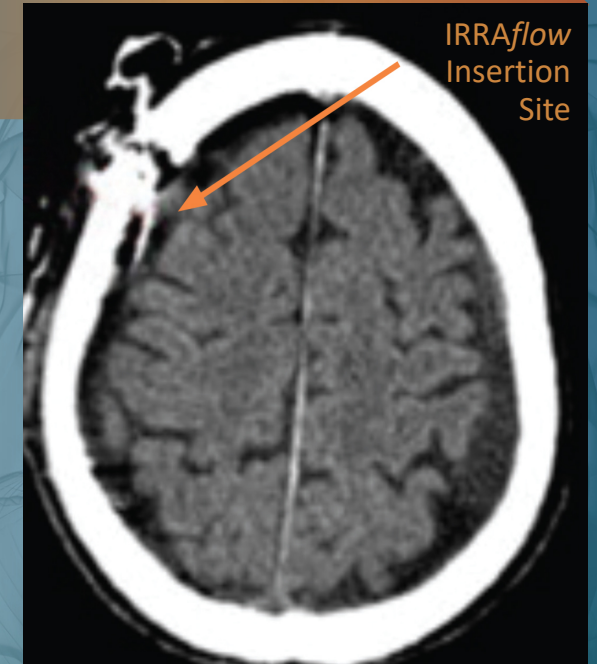
TREATMENT RESULT

- Patient stabilized within 24 hours
- Complete neurological recovery
- Complete clearance of hematoma
- No drainage occlusions seen
- No infection seen

Treatment Time – 24 Hours



Pre-IRRAflow Treatment



Post-IRRAflow Treatment



Ventriculitis



Ventriculitis

Female,
Early 40's



PATHOLOGY TREATED

- Aggressive CSF shunt-related Ventriculitis
- Neurosurgeon description – “mass of germs, impossible to evacuate”



TREATMENT DESCRIPTION

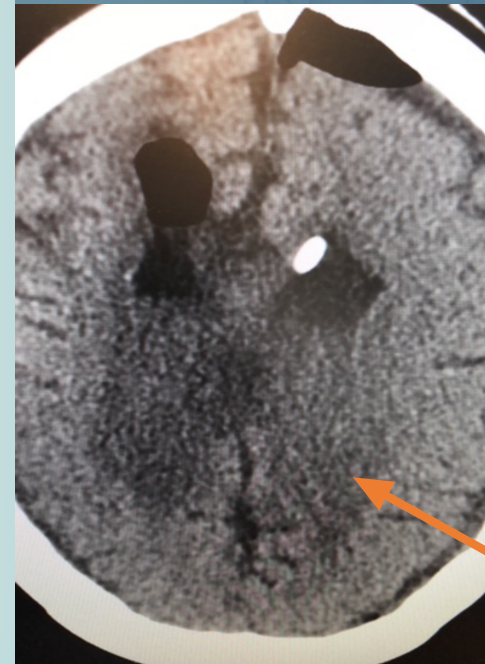
- Physician not yet trained on IRRAflow
- Distributor trained via Skype
- IRRAflow Catheter Probe inserted
- Active Fluid Exchange cleared mass
- IRRAflow Catheter Probe remained in place for entire antibiotic therapy
- After inflammation subsided, IRRAflow removed, shunt replaced



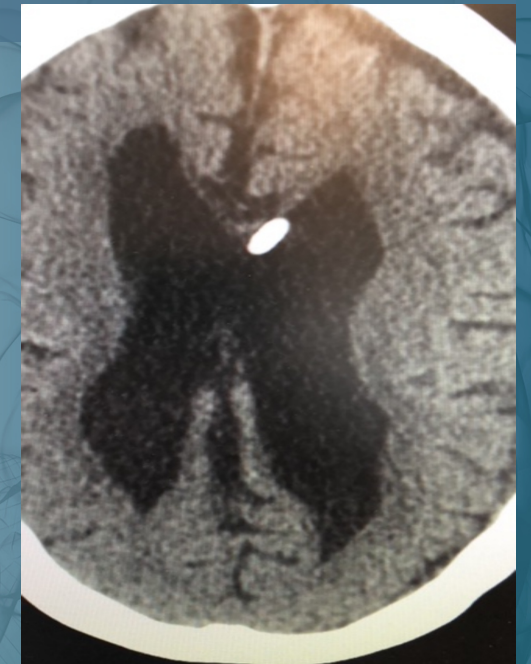
TREATMENT RESULT

- Patient survived
- Released from rehab
- Facility preparing case for publication

“The patient is conscious, no bacteria is left in the brain. She went from 100% probability of death to now conscious. This should not have been possible without IRRAflow.” Dr. Behnam



Pre-IRRAflow Treatment



Post-IRRAflow Treatment

