

Welcome

The past three months have been a whirlwind for Quanta as we've pivoted and accelerated our commercial launch to meet the urgent demand for more dialysis capacity due to the COVID-19 pandemic and the resulting surge in kidney failure. Meanwhile, we have needed to quickly learn new ways of working to cope with the social distancing and lockdown measures necessitated by COVID-19. Through all this, the performance of Quanta's staff has been exemplary. We should all be proud to be part of such a passionate team committed to the mission of improving the lives of dialysis patients.

April was a big month for Quanta, as we achieved three important milestones: (1) our first clinical treatment using the next generation SC+ device that we've been developing over the past two years, (2) the first-ever use of SC+ in an ICU/acute care setting and (3) our first commercial sale. **We now begin a new chapter in the Quanta story as a commercial-stage company!**

Quanta Introduces Next Generation SC+ to the NHS

We're delighted to announce that Quanta's small, simple and versatile haemodialysis system, SC+, is now commercially available in the UK for use in hospitals, dialysis clinics and the home.

Our initial plans to launch SC+ were dramatically altered by the course of the COVID-19 pandemic. Despite having already contracted our first home customers, we were quickly requested to redirect our machines for urgent use in the ICU. Furthermore, Quanta was inundated with pleas from various NHS Trusts desperate to secure much-needed renal replacement capacity. In response to this unprecedented public health crisis, we challenged ourselves to accelerate our roll-out while still maintaining appropriate oversight and staying true to our mantra of "nailing it before we scale it". Consequently, by mid-May we had placed machines with ICUs at four leading NHS Trusts—commercially releasing in one month the total number of machines that we had originally intended to roll-out over our first six months of launch.

To date, performance of the improved next generation SC+ system has been superb, and our customers are delighted. With its compact and portable design, SC+ easily fits into the crowded ICU environment where physical space is at a premium. More importantly, the simplicity of SC+ has allowed ICU nurses (who are not dialysis experts) to quickly learn to use the device with less than six hours of training.

This experience in the demanding critical care setting provides massive real-world clinical and commercial validation to an entirely new market segment for Quanta: using SC+ for assisted therapies outside of dialysis clinics, including ICUs, hospitals and, potentially, skilled nursing facilities.



Equally importantly, our operational capabilities have also been tested and proven. Even though many people at Quanta are now working from home, core customer delivery functions have continued without abatement, with support staff working at our facility to prepare machines and our field staff (nurse-educators and technicians) even going into COVID units. Their *esprit de corps* and commitment to Quanta's mission has been truly impressive.

Meanwhile, we haven't forgotten the home. Indeed, recent [NICE](#) guidelines only serve to reinforce the imperative of keeping as many dialysis patients home as possible. We are in discussions with our customers to resume our launch into the home dialysis segment after the COVID peak recedes. Watch this space.

Lastly, we are also pleased to announce that Quanta has been accepted into the NHS Framework for home dialysis services and dialysis equipment, enabling NHS trusts and clinics to procure SC+ without the need for additional tendering.

Milestone progress

- CE Mark for updated SC+
- FDA in-centre 510(k) submission
- UK Commercial launch
- Completion of Human Factors Testing in US patients
- FDA 510(k) Clearance



Did you know that Quanta's Human Factors paper has been voted one of the most read scientific papers on Hemodialysis International? Take a look by clicking here: <https://doi.org/10.1111/hdi.12757>



Click on the hyperlinks for further information



Clinical Training

Quanta's Clinical Education Team have been working incredibly long-hours over the past few weeks at our customer sites to train up-to 150 ICU (non-dialysis) nurses in each clinic. So far, we have trained over 70 nurses, each of whom has completed training in just 4-6 hours.

Emma Vaux, Consultant Nephrologist at the Royal Berkshire NHS Foundation Trust, said **"Quanta has been able to deliver training in under six hours enabling our ICU nurses to quickly, effectively and efficiently treat those people that need it most"** – a powerful testament to the simplicity of SC+.



Supporting our NHS

With the widely-reported national shortage of personal protective equipment (PPE) for healthcare workers, the team at Quanta has been helping-out by providing surgical mask adapters and face shield headbands using the Company's 3D printers to support the frontline workers in the NHS.

Business as Usual

Despite having to exercise social distancing measures whilst we work and deal with travel restrictions, we're finding new and innovative ways of keeping things moving. The above photo shows a practice session for a live web-broadcast of an SC+ product demonstration, led by CEO John E. Milad and supported by Human Factors Engineer, Kathryn Compton, and Web Architect, Robbie Woodhead.

COVID-19

COVID-19, a particularly deadly strain of coronavirus, kills by inflaming and clogging the tiny air sacs in our lungs, gradually choking the body of oxygen and forcing our organs into irreversible failure. Around the world, clinicians are reporting instances of acute kidney disease in patients diagnosed with COVID-19 presenting with blood or protein in their urine, indicating early damage to the kidneys.

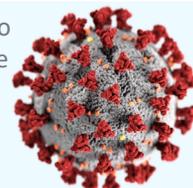
It is widely reported that up to 30% of patients admitted to ICU in both Wuhan, China (birthplace of COVID-19) and New York, US, show symptoms of reduced kidney function and require dialysis during their recovery.

The sudden and unprecedented rise of kidney patients is putting healthcare systems around the world into crisis as there is a worldwide shortage of dialysis machines, trained dialysis clinicians and most recently the sterile fluids required for many dialysis and continuous renal replacement therapy (CRRT) machines.

Meanwhile, it has become self-evident it is increasingly important to keep established (chronic) kidney failure patients—who tend to be older and more vulnerable—at home and out of busy dialysis clinics.

Nephrologists and healthcare providers are already lobbying for more home dialysis. In the United Kingdom, the healthcare guidance body, [NICE](#), has issued new guidance encouraging more home dialysis as a COVID-19 mitigation.

News flow in the last three months has largely been dominated by the COVID-19 pandemic, with articles tending to focus on the shortage of dialysis machines and supplies, both in the UK and the US: [NY Times](#), [Washington Post](#), [The Guardian](#), [BBC News](#), [ProPublica](#) and [MedPage Today](#). There has also been a steady flow of clinical papers on COVID-19: [Kidney International](#), [Kidney Medicine Journal](#) and [Travel Med and Infectious Diseases](#).



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