EXTRANEAL (icodextrin)
Peritoneal Dialysis Solution:
A Patient Training Tool
What You Should Know About EXTRANEAL (icodextrin) Peritoneal Dialysis Solution

Your doctor has prescribed EXTRANEAL (icodextrin) Peritoneal Dialysis Solution as one of your solutions for peritoneal dialysis (PD).

- It’s important to do your dialysis as your doctor has prescribed.

- EXTRANEAL is indicated for use as an osmotic agent for long dwell, up to 12 hours, in continuous ambulatory peritoneal dialysis (CAPD) or automated peritoneal dialysis (APD), where it can be used for 14 and up to 16 hours.

- It’s equally important to do your PD exchanges just as you were taught, every time.

- To track your progress, record your weight, blood pressure, and how you feel every day. If there are any changes, be sure to let your PD nurse know right away.

- If you have insulin-dependent diabetes, pay attention to your insulin dose. See important safety information on page 4.

- If you’re a continuous ambulatory peritoneal dialysis (CAPD) patient and you notice a black-blue color in the drain line when switching from dextrose solutions to EXTRANEAL – don’t worry. The color appears when EXTRANEAL mixes with leftover povidone-iodine in the MiniCap Disconnect Cap.

- Store EXTRANEAL at room temperature (15°C-25°C)

  - Until you use it, keep EXTRANEAL in its moisture barrier overpouch in its carton.
  - Avoid high heat (40°C) and do not store below 4°C.
Always keep some 1.5% dextrose solution at home. Why?

- Using both 4.25% dextrose solution and EXTRANEAL may cause you to become dehydrated and your doctor may direct you to use 1.5% dextrose.

- If you are dehydrated, you may feel dizzy or become weak. Report these symptoms to your PD nurse or doctor immediately.

- Talk to your PD nurse or dialysis doctor about adding any medications to EXTRANEAL.

What To Watch For

You may experience certain side effects while using EXTRANEAL. It’s important to be aware of and report any symptoms you may have. Here are some guidelines:

Rash is the most common side effect of EXTRANEAL. It usually appears during the first 3 weeks of treatment and goes away when treatment stops.

Refer to the Product Monograph for a broader list of side effects. If you experience any side effects while taking EXTRANEAL, contact your dialysis doctor or nurse.

For patients using the HomeChoice Automated PD System and the last fill option, the cycler should be programmed to “dextrose different” and to the volume of EXTRANEAL to be infused. The EXTRANEAL bag should be attached to the line with the blue clamp (last fill line).

Please visit www.glucosesafety.com for Product Monograph and further related information on EXTRANEAL.
Icodextrin or its by-products, such as maltose, may cause some types of glucose monitors and/or test strips to give a **false high glucose reading**.

- To avoid interference by maltose or other metabolites of **EXTRANEAL** (icodextrin), **ONLY use glucose monitors and test strips that are glucose-specific. These methods are common in clinical laboratories. Contact the manufacturer of the glucose monitors and test strips to determine the method that is used.**
- **DO NOT** use glucose monitors or test strips that utilize glucose dehydrogenase pyrroloquinolinequinone (GDH-PQQ) or glucose-dye-oxidoreductase methods. In addition, some but not all monitors or test strips that utilize a glucose dehydrogenase flavin-adenine dinucleotide (GDH-FAD) method should not be used. Use of these methods may result in falsely elevated blood glucose readings in patients using **EXTRANEAL** (icodextrin) due to maltose interference. Falsely elevated blood glucose readings may mask true hypoglycemia or lead to the erroneous diagnosis of hyperglycemia, leading to life-threatening events.

- A false high glucose reading could cause you or a clinician to give you more insulin than you need.
- A false high glucose reading may mask a very low actual glucose reading and cause you to delay in correcting the low blood sugar.
- Both of these situations can cause loss of consciousness, coma, neurological damage and death.
What To Do

• You or your PD nurse must confirm that your glucose monitor(s) and test strip(s) will provide an accurate reading when using EXTRANEAL.

• You must notify your PD nurse and dialysis doctor before you change your home glucose monitor(s) or test strip(s).

• It is important to regularly check the test method of your glucose monitor(s) and test strip(s) with EXTRANEAL. Should the manufacturer that makes your glucose monitor or test strips change its methods of glucose measurement, be sure to contact your PD nurse or dialysis doctor to let them know. They can help you make adjustments if necessary.

• Be sure to discuss this important information about glucose monitors with your family and friends. In an emergency, they will be able to make sure the nurse or doctor knows of the potential for false high glucose readings.

If you have insulin-dependent diabetes, pay attention to your insulin dose and always monitor your blood sugar levels as directed by your dialysis doctor. Here are a few guidelines to follow:

• See important safety information about glucose monitors and test strips on page 3 for additional cautionary measures.

• Be sure to check your blood sugar levels regularly.

• You may need to alter your insulin dose so please discuss with your PD nurse and dialysis doctor.

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What to do if you see health care providers other than those at your PD Clinic:

- Tell the doctors and nurses that you are using EXTRANEAL (icodextrin), and that some glucose monitors and test strips may give a false high glucose reading.

- Take the EXTRANEAL admission envelope with you and give it to the doctor or nurse treating you. This envelope has additional information related to glucose monitors for doctors and nurses.

- Even if you stop using EXTRANEAL, this will not resolve the potential for interference with glucose monitors or test strips. Your blood will have increased levels of icodextrin and maltose for up to two weeks after stopping the use of EXTRANEAL.
Included is a **necklace** that is designed to alert clinicians about the potential for incorrect blood glucose measurements. You should wear it to alert clinicians in an emergency.

A **wallet card** is included here. Present your wallet card, which explains the risks of how maltose may interfere with some glucose monitors.
Because you are on EXTRANEAL, you have received an EXTRANEAL admission envelope. The envelope contains an important information sheet regarding blood glucose levels for your health care team.
If you require a replacement envelope, please order one through your Baxter Home Patient Representative (HPR) Team at 1-866-968-7477.

There is also a patient chart sticker which your clinician may want to use to remind them about your history and can be attached to your medical chart. Your PD nurse will also show you a sample of the envelope and explain all of the components that are included. Some patients find it convenient to keep this kit with their medical travel supplies.

Whenever you go to the hospital, be sure to bring your EXTRANEAL admission envelope along with you.

- It’s important to take the admission envelope with you when you go to the hospital because of this essential information regarding EXTRANEAL and measuring blood glucose levels. Simply give it to the nurse or physician who is seeing you.

If you require a replacement envelope, please order one through your Baxter Home Patient Representative (HPR) Team at 1-866-968-7477.
For more information, contact your Renal Team.

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