Ex vivo assessment with STEEN Solution™ can expand your lung donor pool. About four of every five lungs offered for transplantation are currently rejected by present selection criteria. However, rejected lungs from marginal and extended donors have been successfully used for transplantation for almost two decades and the concept has now become routine practice at some centers.

The ex vivo assessment of marginal lung function, including gaseous exchange at 37°C, was developed by Steen et al and has since been adopted and modified by other centers. The method is now clinically established in many major lung transplant centers worldwide. During EVLP, the perfusion circuit of the lung mimics in vivo conditions; the ventilated lung is perfused with deoxygenated STEEN Solution™ with or without red blood cells and the critical parameters of gaseous exchange, pulmonary vascular resistance, compliance and other key variables under normothermic conditions, are monitored. Clinical evidence has verified that at least six hours of EVLP is safe with an acellular perfusate and that at least two hours is safe with a cellular perfusate. In the USA, the FDA has granted approval for up to four hours of EVLP with an acellular perfusate.

The STEEN Solution™ perfusate used for EVLP permits:

- Refined functional ex vivo evaluation of accept/reject criteria
- Oncotic pressure preventing edema formation
- Increased usage of donated lungs

For reliable objective assessment of donor lungs

STEEN Solution™ is intended for assessment of isolated lungs after removal from the donor body for eventual transplantation into a recipient.

Humanitarian Device: Authorized by Federal law in the USA for use in flushing and temporary continuous normothermic machine perfusion of initially unacceptable excised donor lungs during which the ex vivo function of the lungs can be reassessed for transplantation. The effectiveness of this device for this use has not been demonstrated.
**Maintains stability of isolated lungs ex vivo**

STEEN Solution™ is a buffered extracellular solution that includes human serum albumin to provide an optimal oncotic pressure and Dextran 40 to coat and protect the endothelium from excessive leucocyte interaction. STEEN Solution™ is designed to facilitate prolonged evaluation and promote stability of isolated lungs ex vivo.

STEEN Solution™ offers flexibility in the choice of EVLP methodology. Safe use of STEEN Solution™ in the Scandinavian and the Toronto protocols is clinically documented.

**Clinically evaluated EVLP protocols:**

**SCANDINAVIAN PROTOCOL**
- Red blood cells
- Perfusion flow: 100% CO
- Open left atrium
- CE marked

**TORONTO PROTOCOL**
- Acellular
- Perfusion flow: 40% CO
- Closed left atrium
- FDA approved under an HDE
- CE marked

**STEEN Solution™ contains:**
- Human Serum Albumin – provides normal oncotic pressure preventing edema formation
- Dextran 40 – a mild scavenger which coats and protects endothelium from subsequent excessive leucocyte interaction
- Extra-cellular electrolyte composition

Plasma proteins (HSA) and colloid polymers (dextran 40) bind and retain water within capillaries. The coating of the endothelium with dextran 40 prevents excessive leucocyte interaction.

**Supply information:**

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<th>Reference</th>
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<tbody>
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<td>19004</td>
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**References**


XVIVO Perfusion AB, Box 53015, SE-400 14 Göteborg, Sweden
Tel +46 31 788 21 50 | Fax +46 31 788 21 69 | order@xivivoperfusion.com
xivivoperfusion.com