

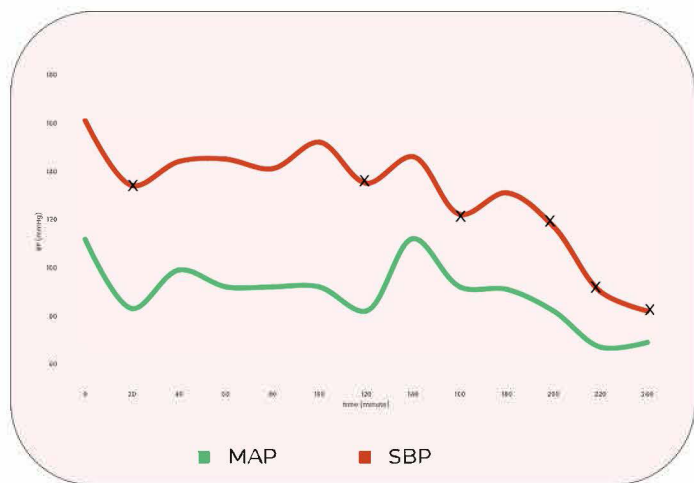
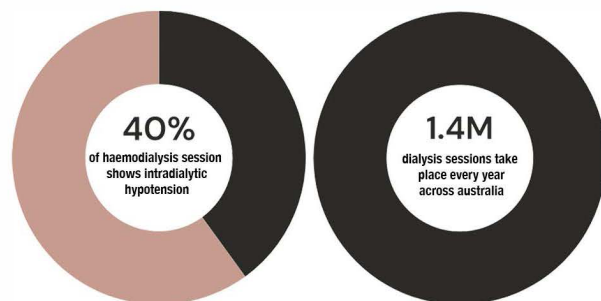


DIALIQ®

Predictive Dialysis Intelligence
for safer fluid removal

Dialysis and Intradialytic Hypotension

End-stage renal disease (ESRD) is rising worldwide, driven largely by diabetes and obesity. Among patient receiving haemodialysis, intradialytic hypotension is one of the most frequent complications. Recurrent IDH leads to reduced organ perfusion, cerebral ischaemia and increased risk of cardiac events.

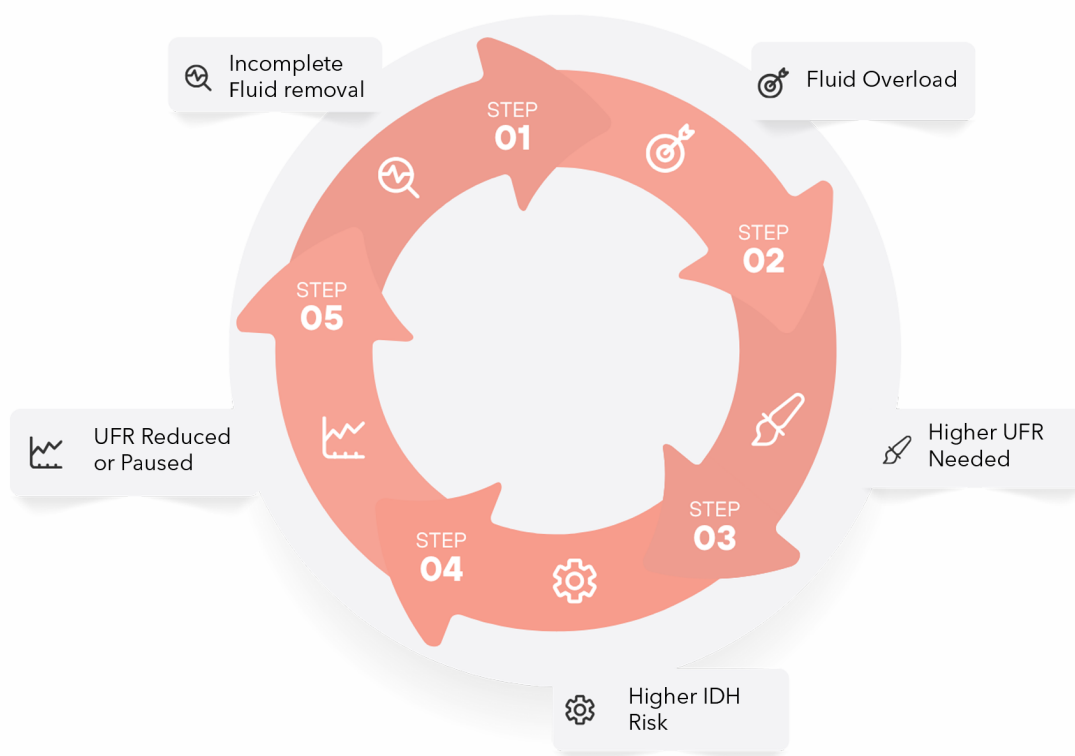


Haemodynamic Dialysis Signal Trends

IDH is one of the most frequent and urgent complications in dialysis. Defined by a ≥ 20 mmHg drop in SBP, these episodes can occur suddenly and require prompt adjustment of fluid removal.

Early recognition is crucial, as repeated IDH reduces perfusion to the heart and brain.

The Vicious Cycle of IDH & Fluid Overload



This creates a narrow clinical window where clinicians must remove enough fluid safely, without pushing the patient toward haemodynamic instability.

A Solution to Safer Fluid Removal

DIALIQ®

DIALIQ® is a clinician-facing AI decision-support tool being developed **to support haemodialysis teams during fluid removal**. It helps clinicians identify **intradialytic hypotension risk** earlier while tracking progress toward the **prescribed ultrafiltration goal**. DIALIQ® does not automatically control dialysis treatment. Instead, it provides a simple risk band and fluid removal insight to **support** clinical judgement, UFR review, and safer dialysis decision-making.



2027 3rd Telehealth Conference
Speaker about IDH and Haemodialysis



Preparing Ethics Approval from
St. Vincent Hospital Melbourne

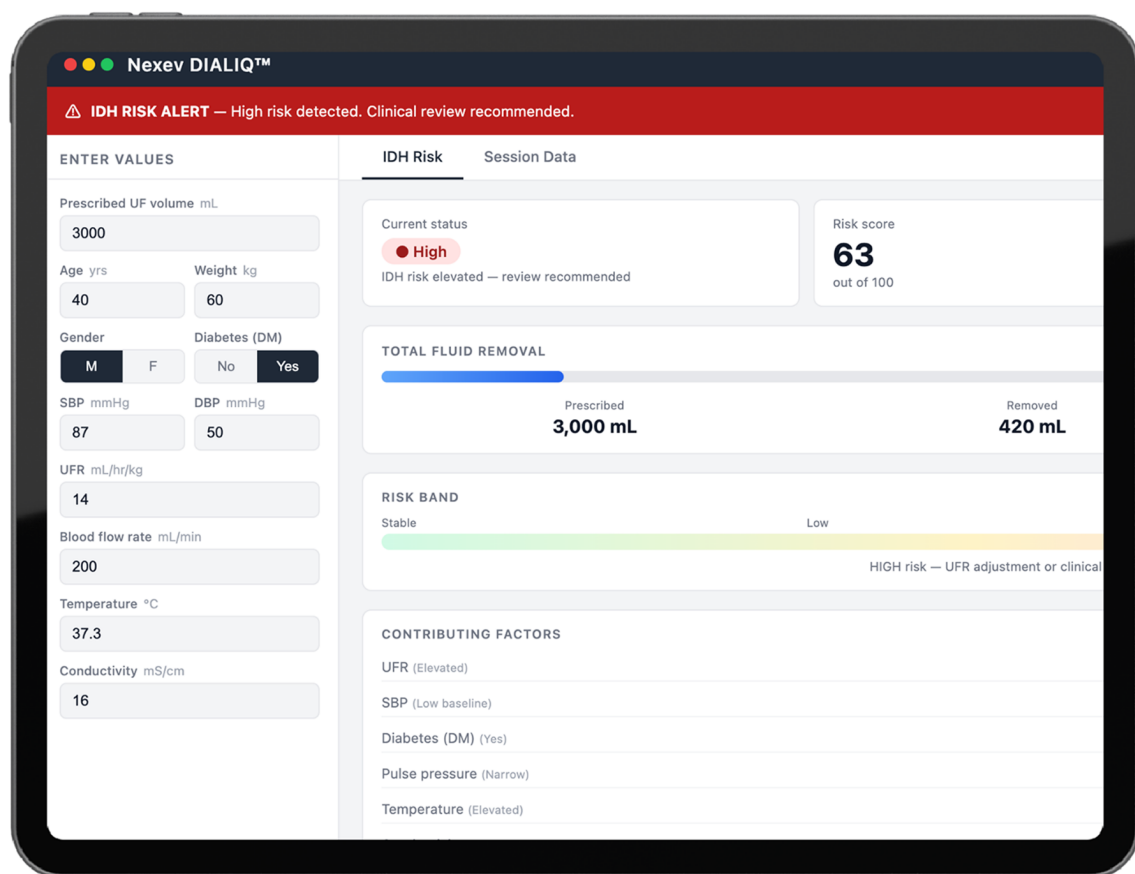
- ✓ Predict IDH Risk
- ✓ Track Fluid Removal
- ✓ Support UFR review
- ✓ Trained by 4.3M records

DIALIQ® vs. Other

	DIALIQ®			
Cost	Very Low	Very High	High	Very High
Clinical Burden?	Very Low	Low	Low	Low
Prediction	30-min risk window	No Prediction	No Prediction	No Prediction
AI Implementation	Yes	No	Yes	No

DIALIQ® Workflow in Haemodialysis Care

DIALIQ® fits into the existing haemodialysis workflow by supporting the regular 30-minute review cycle, when nurses check blood pressure and treatment values. Clinicians enter the current BP, UFR, machine settings, and prescribed UF goal; DIALIQ® then displays the IDH risk band and tracks removed, and remaining fluid volume.



Clinicians enter the current BP, UFR, machine settings, and prescribed UF goal during routine dialysis review.



DIALIQ® displays a simple IDH risk band to support earlier awareness of haemodynamic risk.



DIALIQ® tracks prescribed, removed, and remaining fluid volume throughout treatment.



The care team reviews UFR decisions and receives an alert once the prescribed UF goal is reached.

