



Dear Colleague,

We wanted to share with you a period of great news here at Medasense!

1. Our first clinical outcome study shows positive results in evaluating the role of the NOL technology in guiding opioid administration during surgery for improved outcomes.

The study, led by Professor Albert Dahan and his team from Leiden University Medical Center, (LUMC) demonstrates that using the NOL technology significantly reduced opioid-consumption (33% less RF) and improved hemodynamic stability (80% less hypotensive events) in patients undergoing major surgery.

The results are extremely exciting considering the potential role of NOL to reduce the probability of postoperative complications; a growing body of evidence indicated the correlation between intraoperative hypotension and increased risk of postoperative myocardial injury, acute kidney injury, and mortality rates.

A second study, led by Professor Patricia Lavand'homme and colleagues from the Université Catholique de Lovain in Belgium, indicates that NOL monitoring may predict early and longer-term postoperative pain.

[Please read the full press release here](#)

2. NOL is now included in the new Intensive Care Unit International Guidelines.

We are delighted that the NOL technology is now included in the Clinical Practice Guidelines for the Prevention and Management of Pain, Agitation/Sedation,

Delirium, Immobility, and Sleep Disruption in Adult Patients in the ICU. NOL technology is mentioned as useful in the ICU pain assessment, for situations where self-reports/ behavioral scales are impossible to use.

3. An insightful editorial review, covering all the available nociception monitoring technologies, was recently published in the [Minerva Anestesiologica](#).

The reviewers introduced the NOL technology and cited: “Indices based on a combination of multiple parameters better reflect the nociception intraoperative responses and can be superior to any individual parameter”. The editorial then reviewed the publication by Stockle et al. comparing the NOL to other used parameters for the ability to discriminate nociceptive events at different opioid concentrations. The authors concluded that the “NOL’s multi-parameter approach correlates with distinct levels of nociceptive response with higher sensitivity and specificity than other compared measures.”

4. We are happy to announce to all our Australian colleagues that PMD-200 is now commercially available in Australia!

If you have been waiting to evaluate our technology – write to us at info@medasense.com.

As always, thank you for your continued support in helping us make this happen. To keep updated on our recent news and activities, please follow us on [Linkedin](#) or [click here to view our recent newsletter](#).

Best wishes,

The Medasense team

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