

NICE guidance

NICE guidance (MTG19) supports the use of the geko™ device for people who have a high risk of VTE and for whom pharmacological or other mechanical methods of VTE prevention are impractical or contraindicated¹

geko™
circulation support



VTE Prophylaxis

Providing venous thromboembolism (VTE) prophylaxis to all at risk hospital patients

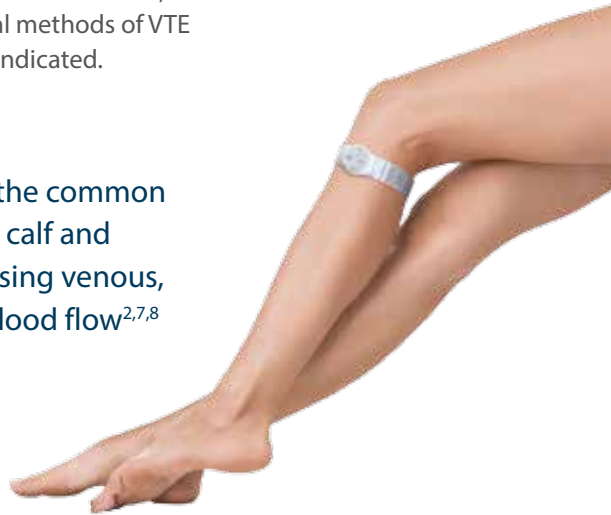
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NICE guidance (MTG19) supports the geko™ device for reducing the risk of VTE¹

The geko™ is a battery powered, disposable, neuromuscular electro-stimulation device designed to increase blood flow in the veins of the leg, reducing the risk of VTE, when pharmacological or other mechanical methods of VTE prevention are impractical or contraindicated.

The geko™ device **stimulates** the common peroneal nerve **activating** the calf and foot muscle pumps and increasing venous, arterial and microcirculatory blood flow^{2,7,8}



The geko™ device is cost saving^{1,3}

The savings, as outlined within the NICE guidance, would result from a reduction in the relative risk of DVT and the associated conditions of VTE such as post thrombotic syndrome as well as reduced length of stay.

NICE guidance estimates a cost saving of **£197**



when the device is used for a period of **6 days**

when compared to no VTE prophylaxis and that under these circumstances use of the device will be **cost saving until day 14.**

In high risk patients when a combination of pharmacological and mechanical VTE prophylaxis is desirable but current mechanical prophylaxis is contraindicated or impractical, the **geko™ device** in combination with pharmacological prophylaxis will be cost neutral for up to 3 days compared to pharmacological prophylaxis alone.



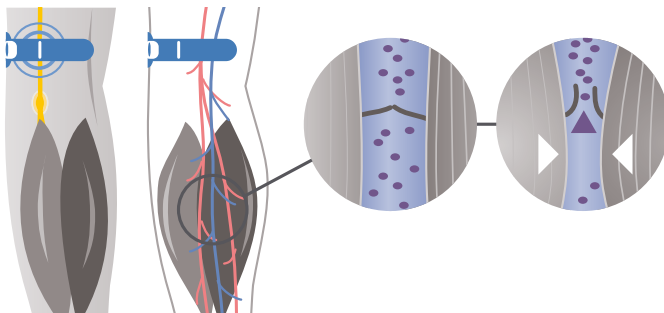
Cost neutral for up to **3 days** of device use.

The adoption of the NICE guidance and the use of the geko™ device supports the NHS objective of providing



cost effective VTE prevention to all at risk hospital patients.

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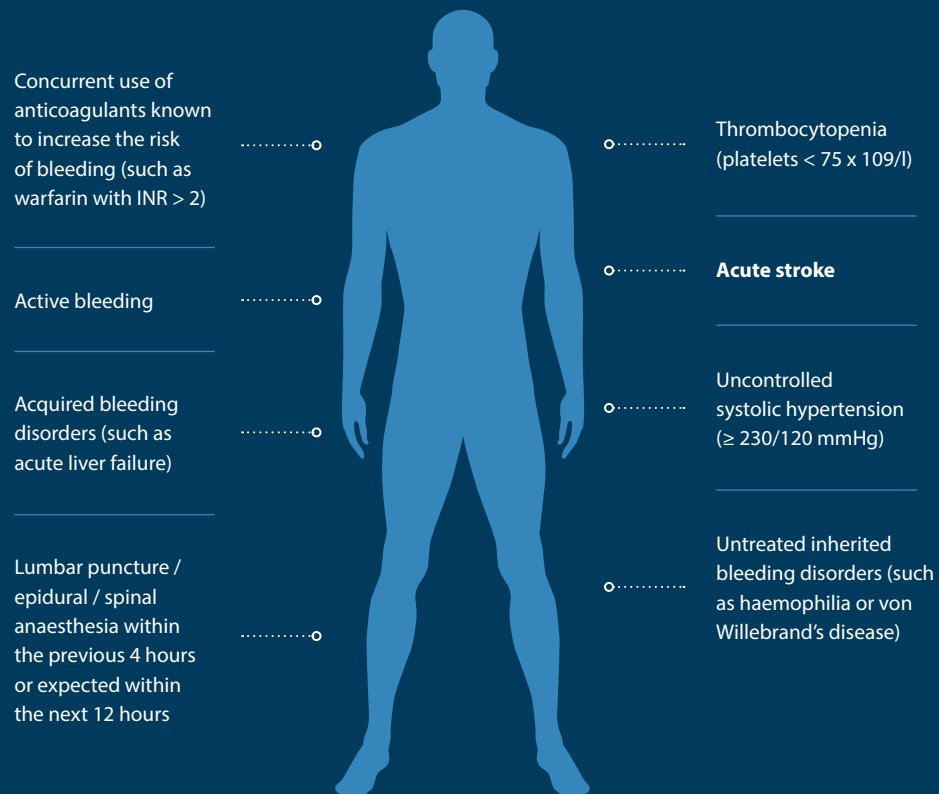


When is pharmacological VTE prevention impractical or contraindicated?

Do not offer pharmacological VTE prophylaxis if patient has any risk factor for bleeding and risk of bleeding outweighs risk of VTE

Who is at risk of bleeding?

All patients who have any of the following:



When is current mechanical compression contraindicated?^{4,5}

- Suspected or proven peripheral arterial disease^{4,5}
- Peripheral arterial bypass grafting⁴
- Peripheral neuropathy or other causes of sensory impairment⁴
- Local conditions in which stockings may cause damage, such as fragile 'tissue paper' skin, dermatitis, gangrene or recent skin graft⁴
- Known allergy to material of manufacture⁴
- Cardiac failure^{4,5}
- Severe leg oedema or pulmonary oedema from congestive heart failure^{4,5}
- Unusual leg size or shape⁴
- Major limb deformity preventing correct fit⁴

Use caution and clinical judgement when applying anti-embolism stockings over venous ulcers or wounds.

Benefits of the geko™ device compared with mechanical compression

Small, light with no leads or wires

10g (weighs just) no trip hazard and reduced bedside apparatus



Discreet, battery operated **knee-worn** micro-device

Wearable & portable technology
toilet visits are simplified



Easy and quick to fit

opportunity for patient self-administration

Silent operation permits undisturbed sleep



high levels of patient compliance

Increases blood flow



up to 60% walking



Daily disposable

potential for less clinical waste

Single sized device

less stock keeping
NO capital investment or maintenance



Potential clinical areas to be explored with VTE committees include:*

- Suspected or proven peripheral arterial disease
- Peripheral arterial bypass grafting
- Cardiac failure
- Bilateral lower extremity trauma
- Local leg conditions in which other mechanical methods of prophylaxis may cause damage or pain
- Patients with a known allergy to the materials used in current methods of mechanical prophylaxis
- Recent vein ligation
- Severe or critical lower limb ischemia
- Stroke – depending on clinical circumstances
- Major trauma or spinal injury
- Pregnancy

The geko™ device prevents stasis in the deep veins of the calf where early thrombi form

The publication of a recent study by Professor Andrew Nicolaides and Dr Maura Griffin has measured the effect of the geko™ device in blood flow in the deep veins of the calf. The study has shown significant volume and velocity increases within the gastrocnemius, peroneal and posterior tibial veins – of particular clinical importance as early thrombi often form in these veins⁹.

This is the first time that a mechanical device has reported enhancement to blood flow for the prevention of stasis in the deep veins, and is the result of the unique dorsiflexion achieved by the geko™ device. With this proven ability to prevent stasis in the deep veins of the calf, the study strongly supports use of the geko™ device for VTE prevention⁹.

Providing venous thromboembolism (VTE) prophylaxis to all at risk hospital patients

- NICE guidance (MTG19) supports the geko™ device for reducing the risk of VTE when pharmacological or other mechanical methods of VTE prevention are impractical or contraindicated¹
- The geko™ device is cost saving¹
- The geko™ device is simple and easy to use⁶

Business Case available on request

Further information available at: www.gekodevices.com

Product order code	MT2RW25
Product description	geko™ T-2 carton (25)
Order placement	0845 2222 920
Enquiries	0845 2222 921
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Email	geko.support@firstkindmedical.com

References

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*Clinicians should assess patients and consider any additional risks associated with increasing the blood flow e.g. following surgery where muscle contractions may disrupt the healing process. Do not apply over sore, infected or inflamed areas, broken skin or skin eruptions, e.g. phlebitis, thrombophlebitis, varicose veins etc. Clinicians should observe the warnings and precautions detailed in the Instructions for Use provided with the device.

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