



## FOR IMMEDIATE RELEASE

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## BAXTER AND VIPUN MEDICAL ANNOUNCE COLLABORATION TO COMMERCIALIZE INNOVATIVE GASTRIC MONITORING SYSTEM TO HELP ENHANCE CLINICAL NUTRITION

- Innovative system measures stomach motility to help clinicians identify enteral feeding intolerance
- Technology designed to help address malnutrition in the ICU and support clinical decision-making
- Baxter gains exclusive distribution rights to bring system to clinicians worldwide

DEERFIELD, III. AND MECHELEN, BELGIUM, JULY 24, 2020 – Baxter International Inc. (NYSE: BAX), a global leader in clinical nutrition, and VIPUN Medical, a company developing technology solutions to help improve medical nutrition, today announced an agreement to commercialize the VIPUN Gastric Monitoring System. This innovative system features a "smart" enteral feeding tube designed to measure stomach motility in order to help clinicians identify enteral feeding intolerance and make better informed nutrition therapy decisions in the intensive care unit (ICU) and other settings. As part of the agreement, Baxter will support clinical studies required to achieve regulatory approval in key markets worldwide and gain global distribution rights. Additional terms of the agreement were not disclosed.

"The VIPUN Gastric Monitoring System will be an important addition to Baxter's nutrition portfolio," said Jorge Vasseur, general manager of Baxter's Clinical Nutrition business. "While indirect calorimetry can help determine individual energy requirements, the VIPUN Gastric Monitoring System is designed to help address the need for accurate, real-time detection of tolerance to enteral feeding. For patients intolerant to enteral nutrition, our broad portfolio of parenteral nutrition products is available to help ensure they get the nutrients they need."





Enteral feeding intolerance (EFI) is a serious problem among patients in the ICU. Approximately four in 10 patients in the ICU will experience EFI, which often leads to inadequate amounts of nutrition delivered to the patient and contributes to their malnutrition risk.<sup>1,2</sup> EFI is associated with negative clinical outcomes like pneumonia, longer length of hospital stay and higher mortality rate.<sup>3,4</sup> Diagnosis, treatment and monitoring of EFI are difficult as they require the evaluation of multiple clinical signs and symptoms, some of which are subjective and controversial, time consuming for clinicians, and vary between clinicians and centers.<sup>3</sup> For patients who cannot tolerate enteral nutrition, parenteral nutrition may be the treatment modality used to reach nutrition targets.

"This innovative technology has the potential to significantly change the way clinicians provide nutrition therapy and directly enhance care of the most vulnerable patients," said Nico Van Tichelen, CEO of VIPUN Medical. "In Baxter, we have found a partner who shares our commitment to helping to improve the practice of medical nutrition as well as the resources and expertise to make this technology available to clinicians and patients who need it most."

## **About Baxter**

Every day, millions of patients and caregivers rely on Baxter's leading portfolio of critical care, nutrition, renal, hospital and surgical products. For more than 85 years, we've been operating at the critical intersection where innovations that save and sustain lives meet the healthcare providers that make it happen. With products, technologies and therapies available in more than 100 countries, Baxter's employees worldwide are now building upon the company's rich heritage of medical breakthroughs to advance the next generation of transformative healthcare innovations. To learn more, visit <a href="https://www.baxter.com">www.baxter.com</a> and follow us on <a href="https://www.baxter.com">Twitter</a>, <a href="https://www.baxter.com">LinkedIn</a> and <a href="https://www.baxter.com">Facebook</a>.

## **About VIPUN Medical**

VIPUN Medical is a privately-owned spin-off company of KU Leuven, pioneering a novel method of gastro-intestinal monitoring aimed at enhancing medical nutrition for critically ill and other vulnerable patients. The VIPUN™ Gastric Monitoring System aims to make it easy for medical staff to make a well-informed and faster nutrition therapy decision thus reducing malnutrition and feeding-related complications. VIPUN Medical is located in Mechelen, Belgium. Visit <a href="www.vipunmedical.com">www.vipunmedical.com</a> for more information.

This release includes forward-looking statements concerning Baxter and VIPUN Gastric Monitoring System including indications, use, effectiveness and risks and expectations with regard to its





availability worldwide. The statements are based on assumptions about many important factors, including the following, which could cause actual results to differ materially from those in the forward-looking statements: satisfaction of regulatory and other requirements; actions of regulatory bodies and other governmental authorities; results of clinical studies; product quality, manufacturing or supply issues; patient safety issues; changes in law and regulations; and other risks identified in Baxter's most recent filing on Form 10-K and other SEC filings, all of which are available on Baxter's website. Baxter does not undertake to update its forward-looking statements.

Baxter is a registered trademark of Baxter International Inc. VIPUN is a trademark of VIPUN Medical NV.

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The VIPUN Gastric Monitoring System is an investigational device and is currently not available for sale in any geography.

- <sup>1</sup> Merchan C et al. Tolerability of Enteral Nutrition in Mechanically Ventilated Patients With Septic Shock Who Require Vasopressors. J Intensive Care Med. 2017 Oct;32(9):540-546
- <sup>2</sup> Heyland DK, et al. The prevalence of iatrogenic underfeeding in the nutritionally 'at-risk' critically ill patient: Results of an international, multicenter, prospective study. Clin Nutr 2015; 34: 659–66
- <sup>3</sup> Gungabissoon U, et al. Prevalence, Risk Factors, Clinical Consequences, and Treatment of Enteral Feed Intolerance During Critical Illness JPEN J Parenter Enteral Nutr. 2015;39:441-448
- <sup>4</sup> Mentec H, et al. Upper digestive intolerance during enteral nutrition in critically ill patients: Frequency, risk factors, and complications. Crit Care Med 2001; 29:1955–1961