

Monitoring of peracetic acid in dialyzer reuse solution remains a challenge

High performance Peracid Test strips safer reuse of reprocessed dialyzers

To avoid pyrogenic reactions, it is critical that the level of peracetic acid(PAA) in the reuse solution be maintained above the minimum concentration of 500 ppm to be effective as a sterilant. However, the physical constraints of the dialyzer construction does not allow testing of the reuse solution directly at the core of the dialyzer. Instead, the solution at the blood port or dialysate port is often used for sampling.

The blood contaminants in the reused dialyzer are found most commonly inside the dialyzer fibers, to a lesser extent at the blood port, and even less at the dialysate port. It is quite likely that solution at the sampling ports will have higher peracetic acid level and, might easily pass the test for 500 ppm while the solution inside the dialyzer in fact has already dropped below that critical level, leaving the most contaminated parts of the dialyzer insufficiently sterilized. This may be particularly true with highly contaminated reused dialyzers. Testing criteria at a higher peracetic acid levels are needed in order to prevent such potential problems. The IBT Peracid Test has continuous quantitation range from 250 to 2000 ppm and allows monitoring of PAA at higher levels where the other indicator strip can't.

Comparison of Performance Characteristics

IBT Peracid Test™	Other indicator test strips
Continuous quantitation from 250 to 2000 ppm peracetic acid, or equivalent of 0.5 to 4 % Renalin®	Qualitative positive/negative test at a single set point of 500 ppm peracetic acid. No quantitation above 500 ppm.
Color blocks provided are 250, 500, 1000, 1500, and 2000 ppm	No quantitative color blocks. Rely on descriptive interpretation of color changes
Easy to read color blocks for quantitation of all effective potency levels	Interpretation of results may be difficult at and around 500 ppm levels



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