COMPANY UPDATE

Kynetyka's DVTect™ technology granted US patent.

August 2021; Melbourne Australia: Kynetyka Technologies Pty Ltd ("Kynetyka"), a privately held Melbourne-based medical device company is delighted to announce that the USA patent for its DVTect™ technology has been granted.

The patent "***A screening test for detection of deep vein thrombosis***" was granted on 3 August 2021, with a patent term of 20 years from 15 October 2015.

Kynetyka Executive Director Craig Newton said "The granting of the US patient is a major milestone for Kynetyka and for the DVTect™ technology. The USA is the world's largest healthcare market and with 900,000 deep vein thromboses (DVT) a year in the US and 100,000 deaths, there is a need for better options for detecting DVT. Kynetyka is making strong progress in developing the unique DVTect™ medical device to enable easy early screening for DVTs"

The proprietary DVTect™ technology is designed to detect abnormalities of the calf muscle as a predictor of DVT. The technology underpinning DVTect™ is based on an analysis of oscillometric waveforms generated in the calf muscle. DVTect™ comprises an accelerometer attached to the calf, with the waveforms sent to a linked device for analysis by proprietary software.

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Kynetyka Technologies Pty Ltd

Kynetyka Technologies Pty Ltd (Kynetyka) is an Australian medical device company, incorporated in September 2017 and headquartered in Melbourne. The company is focused on developing and commercialising their proprietary and unique DVTect™ technology. The DVTect™ technology enables screening for deep vein thrombosis in at-risk patients.

Kynetyka's executive team has collectively over 80 years' experience in the medical/pharmaceutical and technology development sectors both domestically and internationally; their detailed product development knowledge is enabling expeditious development of the device to market. Their experience in engineering, and quality and regulatory compliance ensures the device will be studied appropriately in the clinic and developed to meet national and international regulatory standards. Previous organisations that they have worked with include CSL Limited and CSL Behring (Australia, Switzerland, USA), CSIRO, Serono (UK), Invion Limited, Epworth HealthCare and La Trobe University.

Deep Vein Thrombosis (DVT)

DVT is a significant complication in all surgical and medical wards, as well as in other aspects of community life. It can lead to pulmonary embolism (clots in the lungs) and possible death. There are also dangers of continuing morbidity in the legs and the lungs from the presence of venous thrombo-embolism. At the present time, there is no recognised clinical assessment that has an accuracy greater than 60%; many patients with DVT have no overt clinical findings. Where there are suspicious findings, the specific investigations for confirmation usually involve Doppler ultrasound, which is expensive and requires significant capital equipment and expertise.

DVTect™ technology

When a patient has a DVT in the calf, there is a demonstrable change in the calf muscles in response to a percussive stimulus applied to the tissues; the normal mobility of the calf is reduced.

Kynetyka has developed the DVTect™ device to provide a non-invasive, cost-effective, portable, point-of-care assessment. DVTect™ works by placing a sensor on the calf and applying a percussive stimulus to the muscle. The resulting muscle oscillation is then recorded and transmitted to the DVTect™ device where the waveform of the oscillation is analysed by the DVTect™ software to indicate the presence a DVT.

DVTect™ is a unique medical device for bedside screening, easy to use with minimal inconvenience to the patient. DVTect™ offers the potential to detect DVT, prevent pulmonary embolisms and the associated risk of death, and save on unnecessary ultrasounds and anticoagulation.

As a screening device, the initial target market is hospitals – post-surgery recovery wards, Intensive Care Units and Emergency Departments. It could also be used in primary care on symptomatic patients or those with thromboembolism risk factors.