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FOR IMMEDIATE RELEASE

**FIVE STUDIES ON AQUAPHERESIS™ THERAPY PRESENTED AT
HEART FAILURE SOCIETY OF AMERICA ANNUAL MEETING**

**Studies Expand Knowledge on the Benefits of Fluid Removal by
CHF Solutions' Aquadex FlexFlow™ System**

BROOKLYN PARK, MINN. – September 25, 2006 – Five studies exploring different aspects of CHF Solutions' unique form of ultrafiltration therapy to treat fluid overload in heart failure patients (Aquapheresis™) were presented in poster sessions at the Heart Failure Society of America (HFSA) 2006 Annual Scientific Meeting in Seattle. The new studies expand on, and are consistent with, findings from previous studies, most recently, the landmark UNLOAD study.

“In hospitals across the nation, treating fluid overload in heart failure patients is costly and outcomes often fall short of physician expectations and patient needs,” said John Erb, CEO of CHF Solutions. “Clinical research to date has given us great confidence in the efficacy of Aquapheresis therapy and our Aquadex FlexFlow™ system. These new studies help to validate the results of earlier research and deepen our understanding of our approach. We are also pleased that HFSA, as well as the American Heart Association and the American College of Cardiology, now acknowledge ultrafiltration's effectiveness and recommend its use in their treatment guidelines. This expands our opportunity to improve outcomes and the quality of life for patients while possibly reducing healthcare costs.”

A brief summary of each of the five studies follows:

- A study led by Drs. Syed Saghir, Santosh G. Menon and Eugene S. Chung at Christ Hospital, Cincinnati, compared Aquapheresis with treatment using usual care and treatment using usual care plus nesiritide, a vasodilator. The study concluded that Aquapheresis appears to be a more effective method to remove fluid volume and prevent hospital readmissions in the following 30 days. This self-initiated study is

(more)

consistent with and helps to independently validate the previously presented UNLOAD study results.
(Poster #388)

- At the University of Minnesota, a study led by Dr. Thom G.A. Dahle reviewed outcomes of patients who underwent Aquapheresis therapy using standard peripheral intravenous (PIV) catheters placed in the arms. The study showed that large volumes of fluid can be reliably extracted by Aquapheresis, over an extended time, with peripheral catheters. The authors note that the ability to use peripheral IV catheters will potentially allow this therapy “to be more readily implemented in a variety of care settings.”
(Poster #378)
- A study led by Dr. Bradley Bart, Hennepin County Medical Center, Minneapolis, showed that patients treated with Aquapheresis therapy experienced greater weight loss than patients treated with IV diuretics. They found no correlation between changes in creatinine in the blood, an indication of kidney failure, and the level of fluid loss, suggesting that mechanisms other than fluid volume removal cause worsening renal function in heart failure patients. (Poster #375)
- At Wayne State University, a study led by Dr. Maya E. Guglin found similar changes in BNP (a peptide secreted in the heart in response to excessive stretching) levels in the two groups, despite greater weight and fluid loss with ultrafiltration than with IV diuretics. They suggested that the measures of this biomarker cannot detect the significant differences in volume removed by the two therapies and that changes in BNP levels also lack the sensitivity to predict re-hospitalizations for heart failure. (Poster #381)
- At the University of Minnesota, a study led by Dr. Syed S. Ali found that Aquapheresis extracts significantly more sodium per liter than IV diuretics while simultaneously removing less potassium and magnesium, reducing the need for supplements. This is consistent with previous studies that have shown that ultrafiltration, differently from diuretics, removes isotonic fluid and therefore the greatest possible amount of sodium per unit of fluid withdrawn. (Poster #374)

About the UNLOAD study

UNLOAD is a randomized, multicenter study of 200 patients involving 28 hospitals and medical centers across the United States that details the immediate and long-term benefits for heart failure patients receiving Aquapheresis therapy to treat fluid overload. The UNLOAD study data show that hospitalized heart failure patients receiving ultrafiltration therapy as part of their care lost more weight and experienced greater net fluid loss than patients treated primarily with intravenous diuretics. At 90 days, the ultrafiltration group had significantly fewer follow-up visits to physicians or hospitals. These landmark results were first presented at the 2006 American College of Cardiology conference in March. The study has been accepted by

the *Journal of the American College of Cardiology* and publication is expected fall 2006. For more information about the UNLOAD study, go to www.chfsolutions.com/unload_lbct.html.

About Fluid Overload and Heart Failure

Fluid overload can be caused by many things, including problems with the heart, kidneys, lungs or any combination of these vital organs. The leading cause of fluid overload is congestive heart failure (CHF), sometimes referred to as heart failure (HF). Heart failure is a condition that affects approximately 5 million Americans and is responsible for 1 million hospitalizations annually. More than 500,000 new cases of heart failure are diagnosed each year. The estimated economic burden of heart failure care exceeds \$28 billion annually in the United States. Due to prolonged hospitalizations and high readmission rates, many hospitals often lose more than \$1,000 for each heart failure patient admitted.

About Aquapheresis, the Aquadex FlexFlow and CHF Solutions

CHF Solutions' Aquapheresis therapy with the Aquadex FlexFlow system allows physicians to remove the excess salt and water in patients with fluid overload where, when and how they want. Inpatient or outpatient, peripheral or central venous access, its low blood flow, low extracorporeal blood volume, and precise removal rates enable dependable fluid removal.

CHF Solutions, based in Brooklyn Park, Minn., is a privately held manufacturer of medical devices for cardiac care. The company's mission is to provide medical practitioners with innovative and practical solutions that enable the treatment of patients with unmet clinical needs. For more information, go to www.chfsolutions.com.

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