

Together,
for better care.

FreshAire™

A VitalAire Newsletter for Healthcare Professionals

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New look, same FreshAire™

We're excited about the new FreshAire™ and want to thank you for your interest and support! We couldn't have done the past 7 years of FreshAire™ without you and look forward to supporting you and your practice for many more.

We'd love your feedback!

FreshAire™ is a VitalAire publication for healthcare professionals on a variety of respiratory related topics.

Email us at:

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if you have suggestions on topics you would like to see in the next FreshAire™ newsletter.



myAIRVO™ — Humidified High Flow Therapy: A Study

In recent years, Humidified High Flow Therapy has received a lot of attention. It is intended to provide respiratory support to patients by supplying heated, humidified air at flow rates of up to 60 L/min, with the option of tying in oxygen if necessary. This therapy is used proactively in the hospital setting to treat patients who are experiencing respiratory distress, such as an Acute Exacerbation of Chronic Obstructive Pulmonary Disease (AECOPD). Several studies have highlighted the benefits of Humidified High Flow Therapy, and some new promising studies about the use of this type of therapy for homecare patients are emerging.

COPD patients often suffer from the following symptoms: frequent cough, mucus hypersecretion and dyspnea. When these symptoms get worse, they might be at risk of an exacerbation which can lead to a hospitalization.

With every exacerbation, there is an increased risk of yet another exacerbation. According to a Canadian study, after the second AECOPD, a patient is three times more likely to have another one. The patient is 24 times more likely to have another exacerbation after the tenth AECOPD!

Patients using myAIRVO™ at home experienced improved quality of life.



Less COPD symptoms⁴



Felt more active and could walk further^{2,4}



Felt COPD had less impact on their life⁴

It also reduced AECOPD when using myAIRVO™:

37%

Decreased rates of AECOPD by 37%²

46%

Decreased length of AECOPD by 46%⁵

93%

Increased time to next AECOPD by 93%⁵

And lastly, it improved the patient's breathing:



Felt easier to breathe²



myAIRVO™, a Humidified High Flow Therapy device that a patient can use in home, has shown clinical results in improving the quality of life for patients with COPD and bronchiectasis.^{2,3,5}



These benefits to the patient can be attributed to the following mechanisms of action:

- Airway Hydration which improves mucociliary clearance.
- Respiratory support which helps to wash out the dead space and provides a dynamic positive airway pressure. This leads to an increased alveolar ventilation.
- Patient comfort which means it's easy to use and comfortable for the patient. This can lead to an increased use of therapy which is often associated with better patient outcomes.

myAIRVO™ is easy to use and provides humidified high flow therapy in the comfort of the patient's own home.

It is an excellent therapy to consider for patients who are still struggling to manage their symptoms despite their current medications and therapies.

Given the nature and progression of this disease, it is critical to identify a therapy that may aid in reducing exacerbations, their severity, and/or the time between them.



Home Ventilation

Ventilation is the act of breathing in oxygen and breathing out carbon dioxide. The primary muscle that assists in breathing is the diaphragm but there are many accessory muscles that also assist. If any of these muscles do not function properly then breathing becomes difficult and ineffective, decreasing the oxygen coming in the carbon dioxide out, which can lead to many health related issues. Patients with ineffective breathing often need the assistance of Mechanical Ventilation; this can be short term or long term. A Mechanical Ventilator will push oxygen enriched air into the lung and help expel carbon dioxide. Patients may require long term mechanical ventilation for various reasons like stroke, respiratory conditions ie: COPD, spinal cord injury or neuromuscular issues.

A mechanical ventilator may be needed continuously or certain times throughout the day or night, for example when sleeping. The ventilator may also breathe entirely for the patient if the respiratory muscles do not function at all or simply support the patient if there is some muscle function.

Ventilation support can be administered “invasively” typically through an endotracheal tube inserted in through the mouth or nose, this is typically for short term ventilation whereas for long term ventilation, a tracheostomy tube is inserted in the neck. Ventilation can also be administered “non- invasively” typically done via a face mask placed over the mouth and nose.



A patient's diagnosis, duration of use and support required will determine if the ventilation is invasive or non-invasive.



Ventilation is usually started in an acute care setting but once the patient is stable and the need is long term the patient can be transitioned home with a home ventilator. This takes careful planning with the care team including physicians, nurses, patient, family and the home care company staff. Pre discharge from the hospital, extensive training takes place with the family. Training includes: understanding the disease process, ventilator usage, cleaning/infection control and emergency preparedness. Once home, the homecare team specialized in home ventilation will continue to support the patient and caregivers.

With the advancement of medicine many patients are surviving longer supported by mechanical ventilation. With the increase in the cost of healthcare and the improvement in technology, smaller ventilators and telemedicine, more patients are being transitioned successfully to home based care.

Introducing F&P Evora™



Introducing F&P Evora™, Fisher & Paykel Healthcare's newest compact nasal CPAP mask for the treatment of obstructive sleep apnea. Evora™ features the world's first CapFit™ headgear and the next generation of Dynamic Support.

Just like putting on a cap

Unlike any other mask, F&P Evora™ incorporates CapFit headgear that has been designed to be put on like a cap – a simple and intuitive movement that patients are familiar with.

The headgear structure ensures the seal is presented in the right place every time, making life easy for you and your patients. It is made from soft-knit fabric with AirEdges to avoid leaving marks on your patient's face.

The headgear comes in one size with three points of adjustment providing your patients with an easy and comfortable fit.

The next generation of Dynamic Support

The stability wings work in synergy with the floating seal to allow freedom of movement while keeping F&P Evora™ comfortably in place.

Minimal and unobtrusive, the floating seal engages to wrap around the nose to provide a flexible and comfortable fit. There are four seal sizes available: Small, Medium, Large and Wide.

F&P Evora™ has been designed to be a mask that your patients want to use and can use. **F&P Evora™. Simply CapFit.**



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