UNDERSTANDING THE PREVALENCE OF BRONCHIECTASIS
The Burden of Bronchiectasis

Patients who have COPD, chronic bronchitis, pneumonia, asthma, cystic fibrosis or other chronic lung disease, often also have bronchiectasis. Being able to identify these patients means you are able to create treatment plans to help mobilize any retained pulmonary secretions and reduce the symptom burden of bronchiectasis.

Recent estimates show an increasing prevalence of symptomatic bronchiectasis.\(^1\) Research on Bronchiectasis COPD Overlap Syndrome is growing. Use of high-resolution computed tomography (HRCT) to diagnose it is also increasing.

- Undiagnosed bronchiectasis remains a burden with estimates indicating that up to 85% of those with symptomatic bronchiectasis may be undiagnosed.\(^2,3\)
- Studies demonstrate that up to 50% of patients with moderate to severe COPD have comorbid bronchiectasis.\(^4-6\)

LEARN MORE AND VIEW SOLUTIONS FOR COPD AND BRONCHIECTASIS BY VISITING LIVINGWITHBE.COM
Airway Clearance Therapies and Outcomes

Although there is no cure for bronchiectasis, early detection and treatment can help patients to have a better quality of life and prevent further lung damage. Along with antibiotics and other appropriate medications, airway clearance therapies provide an effective, safe treatment. Studies have found improved clinical outcomes for bronchiectasis patients who use High Frequency Chest Wall Oscillation (HFCWO) therapy. Hillrom offers several Airway Clearance Therapies to help your bronchiectasis patients:

**The Vest® Airway Clearance System**
Delivers HFCWO therapy and is designed to help mobilize retained secretions from the airways. It is available in both the home and acute care settings. Therapy data connectivity is also available.

**The Monarch® Airway Clearance System**
A revolutionary technology for mobile HFCWO therapy offering patients freedom to move about. The therapy combines targeted kinetic energy and airflow to thin and mobilize secretions from the airways. Therapy data connectivity is also available.

**The Connex® App, Health Portal and Smart One® Spirometry**
Patients can keep track of daily therapy, medications, Pulmonary Function Tests (PFTs), nutrition, exercise and more. Using Smart One Spirometer, patients can also track lung health at home through the Connex App. And with the Connex Health Portal, you have quick access to patients’ vest therapy usage and at-home spirometry information.

Clinical Outcomes

Bronchiectasis patients receiving HFCWO therapy had significantly improved key clinical outcomes within 12 months. These patients had been particularly challenged with more severe disease, and/or acute exacerbations.\(^7,8\)

- 66% reduction in acute exacerbations (p=0.0073)
- 65% reduction in hospitalizations (disease-specific, inpatient) (p=0.0043)
- 16% reduction in emergency department visits (p=0.0606)
- 9% reduction in oral antibiotic use (p=0.0017)
- 46% reduction in IV antibiotic use (p=0.0106)
ABOUT HILLROM

Hillrom is a global medical technology leader whose 10,000 employees have a single purpose: enhancing outcomes for patients and their caregivers by advancing connected care. Around the world, our innovations touch over 7 million patients each day. They help enable earlier diagnosis and treatment, optimize surgical efficiency and accelerate patient recovery while simplifying clinical communication and shifting care closer to home. We make these outcomes possible through connected smart beds, patient lifts, patient assessment and monitoring technologies, caregiver collaboration tools, respiratory care devices, advanced operating room equipment and more, delivering actionable, real-time insights at the point of care. Learn more at hillrom.com.

References

2 Tan, et al. Findings on Thoracic Computed Tomography Scans and Respiratory Outcomes in Persons with and without Chronic Obstructive Pulmonary Disease: A Population-Based Cohort Study. 2016. DOI:10.1371/journal.pone.0166745. PLOS ONE. Estimate leverages prevalence data of asymptomatic and minimally symptomatic respiratory disease patients that would otherwise be undiagnosed through HRCT scans, age ≥ 40 years, applied to US census data.

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