

WHY YOU MAY HAVE BRONCHIECTASIS



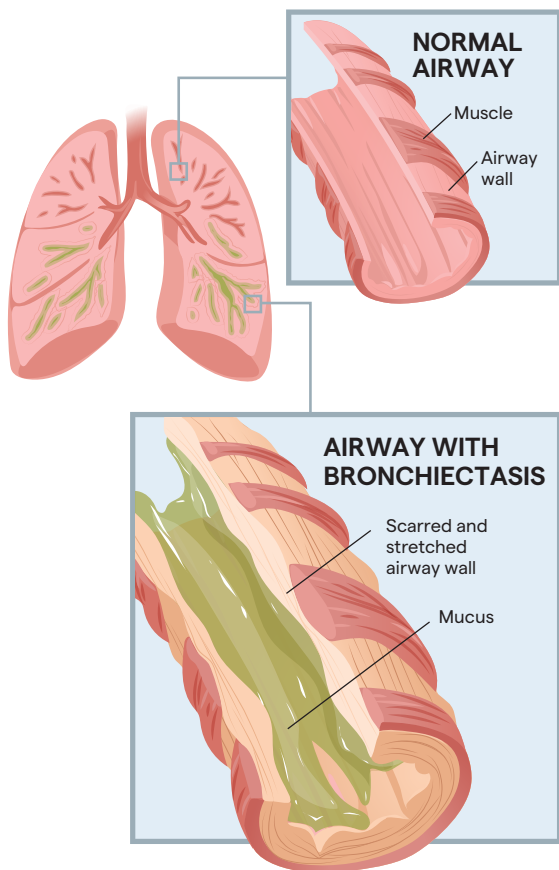
How airway
clearance therapy
can help



Hillrom™

KNOWLEDGE IS POWER

WHAT IS BRONCHIECTASIS (BE)?



Bronchiectasis (brong-ke-EK-ta-sis) (BE) is a disease in which the walls of your airways widen and become permanently damaged. The scarred airways lose their ability to clear mucus out of the lungs. Over time, mucus and bacteria build up and may lead to serious lung infections. This BE cycle, if left untreated is hard to break.

Learn more about BE by visiting
www.LivingWithBE.com

92.7%

of patients diagnosed with COPD with two or more flare-ups or one hospitalization in 12 months **also had bronchiectasis¹**

Could you have bronchiectasis?

Check the boxes if you agree with the statement.

DO YOU:

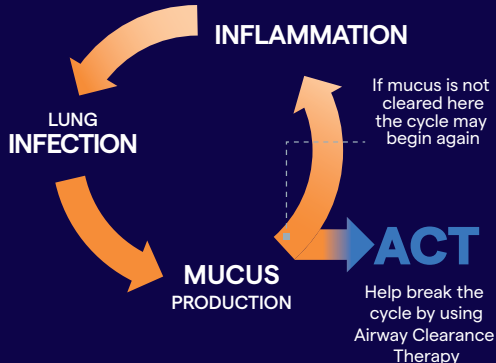
- ☐ Have COPD or another chronic lung disease?¹⁻⁴
- ☐ Have a daily cough for the past 3 months or longer?^{3,4}
- ☐ Have frequent coughing episodes with mucus in varying amounts that is usually or often thick, yellow, green or discolored?^{3,4}

IN THE LAST 12 MONTHS HAVE YOU:

- ☐ Been on at least 2 courses of antibiotics for a respiratory infection or bronchitis?^{1,2,5}
- ☐ Been hospitalized for a respiratory or lung infection?¹⁻⁵

Break the cycle

When you have BE, your airways slowly lose their ability to clear out mucus. Built up mucus creates an environment in which bacteria can grow, cause inflammation, and lead to serious, repeated lung infections. But we know how important it is to break the cycle and one way to do that is with airway clearance therapy (ACT).



Improve your quality of life with airway clearance therapy

Early detection and treatment of BE can lead to a better quality of life and may prevent further lung damage. Your doctor may prescribe antibiotics and other appropriate medications in addition to airway clearance therapy (ACT). While there is no cure for BE, treatments are available, and following a healthy lifestyle is important for overall health.⁶

Recent research evaluated the benefit of ACT using High Frequency Chest Wall Oscillation (HFCWO), or “vest therapy,” for BE. HFCWO use resulted in fewer hospitalizations, physician office visits and antibiotics used.⁷



Effective airway clearance therapy options from Hillrom

HFCWO therapy provides airway clearance by applying gentle oscillations to the chest wall. These oscillations create airflows that move mucus upward where it is easier to cough out, keeping mucus from building up in your lungs.



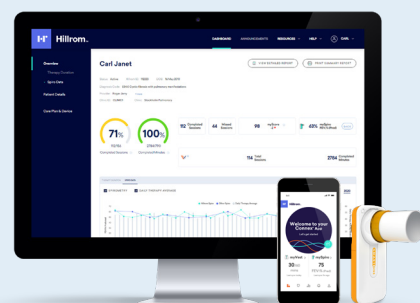
The Vest® Airway Clearance System

Delivers HFCWO therapy, using an air-vest garment, to help move mucus out of the lungs. It is easy to use, comfortable and portable. It also comes with the Hillrom™ Connex® App to help you manage daily care, and keep your health care team in the loop.



The Monarch® System

Mobile HFCWO therapy with freedom to move about your life and multitask, too. The therapy combines mobility with targeted kinetic energy and airflow to thin and move secretions within the airways. It also comes with the Hillrom™ Connex® App, to help you manage daily care, and keep your health care team in the loop.



The Hillrom™ Connex® App

Being connected is good for your health. The Connex App helps you keep track of airway clearance therapy and things you do daily for your health. Also, using a Smart One® Spirometer, you can track lung health at home in the Connex App. This helps your care team have a clear picture of how therapy is going for you, too.

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.

For more information, contact Hillrom customer service at 1-800-426-4224 or visit LivingWithBE.com.



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- ¹ Kosmas E, Dumitru S, Gkatzias S, et al. Bronchiectasis in patients with COPD: an irrelevant imaging finding or a clinically important phenotype? American College of Chest Physicians. Elsevier Inc., 2016. Doi:<http://dx.doi.org/10.1016/j.chest.2016.08.994>.
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 - ⁴ Barker AF. Bronchiectasis. *N Engl J. Med* 2002; 346: 1383-1393.
 - ⁵ Du Q, Jin J, Liu X, Sun Y. Bronchiectasis as a Comorbidity of Chronic Obstructive Pulmonary Disease: A Systematic Review and Meta-Analysis. *PLoS ONE*. 2016. 11(3): e0150532. doi:10.1371/journal.pone.0150532.
 - ⁶ Bronchiectasis. NIH: National Heart, Lung, and Blood Institute website. <https://www.nhlbi.nih.gov/health-topics/bronchiectasis>. Accessed September 11, 2020.
 - ⁷ Basavaraj A, DeKoven M, Shah D, et al. Impact of High Frequency Chest Wall Oscillation on Clinical Outcomes and Healthcare Resource Utilization in Adult Patients with Non-Cystic Fibrosis Bronchiectasis in the United States: A Pre-Post Cohort Analysis. *American Journal of Respiratory and Critical Care Medicine* 2020;201:A7758.

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