

A guide to chronic respiratory diseases.

Learn about the benefits of high frequency chest wall oscillation (HFCWO) therapy.



AFFLOVEST®
MOBILE AIRWAY CLEARANCE THERAPY

Tactile
MEDICAL®

Who is at risk?

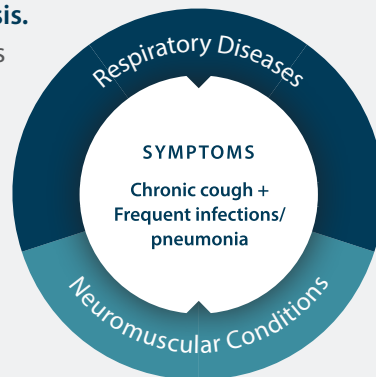
Patients who have chronic respiratory, and or neuromuscular, conditions often struggle to clear their airways. These are patients who cannot clear mucus secretions due to:

- A physiological change to the airways caused by lung disease or infection
- The inability to effectively cough

Patients who cannot clear their airways effectively are at risk for respiratory complications and hospitalizations.

The challenge of getting a complete diagnosis.

Getting a complete diagnosis for your patients who suffer from chronic airway disease can be challenging because the symptoms often overlap. Despite the similarities, each disease has a unique impact on lung function, acute exacerbations, and mortality and treatment can vary. A complete diagnosis will allow you to create the best care plan to improve your patients' quality of life.



Airway clearance therapy can help.

Airway clearance therapies are recommended for individuals whose ability to mobilize and clear airway secretions is compromised. They aim to minimize the effects of airway obstruction, infection, and inflammation for those with lung disease.

What is high frequency chest wall oscillation (HFCWO)?

HFCWO, or vest therapy, uses mechanical vibration to mobilize mucus so it can be removed by coughing or suction.

Reducing symptoms using HFCWO.

Studies show that HFCWO vest therapy improves lung function, quality of life, and reduces symptoms compared to traditional chest physiotherapy (CPT).¹ In addition, HFCWO vest therapy is proven to decrease hospitalizations and antibiotic use.²



Our patented Direct Dynamic Oscillation™ technology utilizes eight oscillating motors to create individual pressure waves that target all lobes of the lungs. This technology was designed to mobilize secretions by mimicking manual chest physiotherapy.

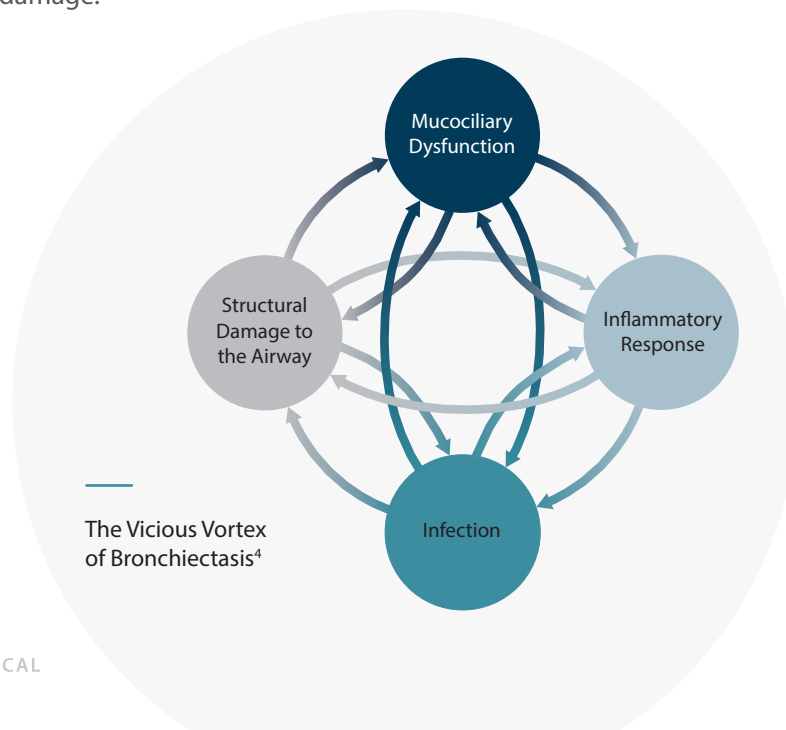
HFCWO for bronchiectasis.

Bronchiectasis is a chronic condition where the walls of the airways thicken as a result of chronic inflammation and or chest infections. Bronchiectasis has recently been described as a vicious vortex due to the complex interplay of pathophysiologic steps as shown below. It can be tricky because it often presents like COPD, but won't respond to COPD therapy.

It is an underdiagnosed condition that requires a CT scan to accurately diagnose and treat. In fact, studies estimate that of the 12+ million individuals in the U.S. living with COPD, 42% may also have bronchiectasis.³ If a patient presents a chronic cough and has multiple pneumonias, consider a CT scan to look for bronchiectasis.

HFCWO therapy can help.

HFCWO therapy is a non-pharmaceutical way to clear excess mucus from the lungs and airways, as well as provide relief from coughing and bacterial infections. It is also critical to prevent further obstructions of the airways and minimize lung damage.



HFCWO for neuromuscular diseases.

Patients with neuromuscular diseases have difficulty forming a cough due to respiratory muscle weakness and chest wall abnormalities.⁵ This ineffective coughing can lead to secretion retention, airway obstruction, inflammation, infection, and a struggle to breathe.

HFCWO therapy is a cornerstone technique in managing respiratory disorders associated with:

- Muscular Dystrophy (MD)
- Amyotrophic Lateral Sclerosis (ALS)
- Multiple Sclerosis (MS)
- Quadriplegia



Disorders of the Diaphragm.

These disorders can result from trauma, injury, or illness⁶ and includes eventration, weakness, and paralysis.⁷ It can occur in many diseases or as a result of injuries and may contribute to an ineffective cough and inability to mobilize secretions.^{8,9}

Myopathy.

Myopathies are diseases that affect the muscle fibers, and they can be inherited or acquired. Although they affect patients differently, and are more common in the proximal muscles, myopathy can be present in respiratory muscles, which makes it difficult for patients to cough and clear secretions.

HFCWO therapy can help.

HFCWO therapy is indicated for patients who have clear documentation of a history of inability to clear secretions, a defined diagnosis, and have tried and failed other methods of treatment.

HFCWO for cystic fibrosis.

Cystic fibrosis (CF) is an inherited genetic disease that causes damage to the lungs, digestive system, and other organs. Patients with CF produce thick, sticky mucus that traps germs and bacteria, which leads to infection and other respiratory complications.

Thanks to advances in pharmaceutical medicine, many individuals living with cystic fibrosis are able to better manage their respiratory health.

HFCWO therapy can help.

In addition to pharmaceuticals, HFCWO therapies are still commonly prescribed as a preventive treatment to loosen and mobilize secretions.



"It's so easy for me to strap it on and go cook dinner or get ready with my morning coffee. So it's not cutting into my day. It doesn't feel like a burden. I'm able to just add it into my already active lifestyle."

EMILY L., CYSTIC FIBROSIS PATIENT

The AffloVest difference.

Adherence is key, so is choosing the right vest.

At-home therapy is only as effective as the patient's willingness to adhere to it. That's why it makes sense to prescribe the vest that patients are more likely to use. In a recent study, participants overwhelmingly preferred AffloVest mobile airway clearance therapy over bladder style vests.¹⁰

The anywhere therapy.

AffloVest can be used at home, work, or on the go. Our HFCWO technology is designed to help loosen and clear the excess mucus — allowing your patients to breathe better and resume their everyday joys.



93%
prefer AffloVest
to bladder style vests¹⁰

AffloVest is preferred over bladder style vests for comfort, auditory experience, lifestyle and use around others.¹⁰

To learn more about AffloVest HFCWO and how to prescribe, visit afflovest.com.

Tactile Medical is a leader in developing and marketing at-home therapies for people suffering from underserved, chronic conditions including lymphedema, lipedema, chronic venous insufficiency and chronic pulmonary disease by helping them live better and care for themselves at home.

FOR MORE INFORMATION, PLEASE VISIT [AFFLOVEST.COM](https://www.afflovest.com)

Individual results may vary.

Indications/contraindications: Indications, contraindications, warnings, and instructions for use can be found in the product labeling supplied with each device.

Caution: Federal (U.S.) law restricts this device to sale by or on the order of a licensed healthcare practitioner.

References:

1. Nicolini, A. et al., Effectiveness of treatment with high-frequency chest wall oscillation in patients with bronchiectasis. *BMC Pulmonary Medicine*. 2013;13:21.
2. Therapeutic Advanced Respiratory Disease. Real-life experience with high-frequency chest wall oscillation vest therapy in adults with non-cystic fibrosis bronchiectasis. Barto. 2020.
3. Ford ES, Murphy LB, Khavjou O, Holt JB, Croft JB., Total and State-Specific Medical and Absenteeism Costs of COPD Among Adults Aged 18 Years in the United States for 2010 and Projections Through 2020; *CHEST American College of Chest Physicians*; CDC; 2014.
4. Graphic adapted from Flume PA, Chalmers JD, Olivier KN. Advances in bronchiectasis: endotyping, genetics, microbiome, and disease heterogeneity. *Lancet*. 2018;392(10150):880–890. doi:10.1016/S0140-6736(18)31767–7.
5. Chatwin M, Toussaint M, Goncalvez MR, Sheers N, Mellies U, Gonzales-Bermejo J, et al. Airway clearance techniques in neuromuscular disorders: a state of the art review. *Respiratory Medicine* 2018;136:98–110.
6. Ottenheijm, C.A., Heunks, L.M. & Dekhuijzen, R.P. Diaphragm adaptations in patients with COPD. *Respir Res* 9, 12 (2008).
7. Ganon, P. et al. Pathogenesis of Hyperinflation in Chronic Obstructive Pulmonary Disease. *Int. Journal Chronic Obstructive Pulmonary Disease*. 2014; 9:18–201.
8. McCool, F. et al. Dysfunction of the Diaphragm. *New England Journal of Medicine*. 2012; 366(10): 932–942 3.
9. Papaiwannou, A. et al. Asthma–Chronic Obstructive Pulmonary Disease Overlap Syndrome (ACOS): current literature *Review Journal of Thoracic Disease*. 2014; 6(s1):s146–s151.
10. Wetherby M, Dunn N, A Patient Preference Study of HFCWO. *RT Magazine*. May/June 2023.

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