WEBVTT

NOTE duration:"01:02:08" NOTE recognizability:0.842

NOTE language:en-us

NOTE Confidence: 0.866716220526316

 $00:00:04.450 \longrightarrow 00:00:05.682$ So good afternoon everyone,

NOTE Confidence: 0.866716220526316

 $00:00:05.682 \longrightarrow 00:00:07.530$ and as usual I'll start with

NOTE Confidence: 0.866716220526316

00:00:07.590 --> 00:00:09.330 a few announcements before I

NOTE Confidence: 0.866716220526316

 $00:00:09.330 \longrightarrow 00:00:10.722$ introduce our speaker today.

NOTE Confidence: 0.866716220526316

 $00:00:10.730 \longrightarrow 00:00:12.470$ First, these sleep seminar lectures

NOTE Confidence: 0.866716220526316

 $00:00:12.470 \longrightarrow 00:00:14.549$ are available for credit when viewed

NOTE Confidence: 0.866716220526316

 $00{:}00{:}14.549 \dashrightarrow 00{:}00{:}16.516$ in real time and to receive credit.

NOTE Confidence: 0.866716220526316

 $00{:}00{:}16.520 \dashrightarrow 00{:}00{:}19.264$ Just text the ID for the lecture

NOTE Confidence: 0.866716220526316

 $00:00:19.264 \longrightarrow 00:00:21.949$ to Yale Cloud CME by 3:15 PM there

NOTE Confidence: 0.866716220526316

 $00:00:21.949 \longrightarrow 00:00:23.263$ will be information that shows up

NOTE Confidence: 0.866716220526316

00:00:23.263 --> 00:00:24.736 in the chat so you can see it.

NOTE Confidence: 0.866716220526316

 $00{:}00{:}24.740 \dashrightarrow 00{:}00{:}27.092$ Then recordings of the lectures are

NOTE Confidence: 0.866716220526316

 $00:00:27.092 \longrightarrow 00:00:29.889$ available about two weeks after the lecture.

 $00:00:29.890 \longrightarrow 00:00:32.236$ There's no CME credit for recordings.

NOTE Confidence: 0.866716220526316

 $00{:}00{:}32.240 \dashrightarrow 00{:}00{:}34.060$ If you have questions during the talk.

NOTE Confidence: 0.866716220526316

 $00:00:34.060 \longrightarrow 00:00:34.912$ Please use the chat.

NOTE Confidence: 0.866716220526316

 $00{:}00{:}34.912 \dashrightarrow 00{:}00{:}36.424$ I will moderate the chat at the

NOTE Confidence: 0.866716220526316

 $00:00:36.424 \longrightarrow 00:00:37.912$ end so that way we can address all

NOTE Confidence: 0.866716220526316

 $00:00:37.912 \longrightarrow 00:00:39.550$ the questions and you'll have the

NOTE Confidence: 0.866716220526316

 $00:00:39.550 \longrightarrow 00:00:40.950$ opportunity to unmute yourself at

NOTE Confidence: 0.866716220526316

 $00:00:40.950 \longrightarrow 00:00:42.528$ the end as well and otherwise.

NOTE Confidence: 0.866716220526316

00:00:42.530 --> 00:00:44.670 Please keep your microphone muted,

NOTE Confidence: 0.866716220526316

00:00:44.670 --> 00:00:46.875 so now it's really my great pleasure

NOTE Confidence: 0.866716220526316

 $00{:}00{:}46.875 \dashrightarrow 00{:}00{:}48.657$ to introduce today's sleep seminar

NOTE Confidence: 0.866716220526316

00:00:48.657 --> 00:00:50.205 speaker Doctor Amanda Piper.

NOTE Confidence: 0.866716220526316

00:00:50.210 --> 00:00:52.770 She joins us from Sydney where it is

NOTE Confidence: 0.866716220526316

00:00:52.770 --> 00:00:54.397 currently December 2nd and 6:00 AM,

NOTE Confidence: 0.866716220526316

 $00:00:54.400 \longrightarrow 00:00:56.446$ so that's amazing that she's here,

NOTE Confidence: 0.866716220526316

 $00:00:56.450 \longrightarrow 00:00:58.406$ and so we're thrilled for that.

 $00:00:58.410 \longrightarrow 00:01:00.909$ Doctor Piper is a team leader at

NOTE Confidence: 0.866716220526316

 $00{:}01{:}00.909 \dashrightarrow 00{:}01{:}02.412$ Respiratory Support Service and

NOTE Confidence: 0.866716220526316

 $00:01:02.412 \longrightarrow 00:01:04.247$ home ventilation programs in the.

NOTE Confidence: 0.866716220526316

00:01:04.250 --> 00:01:06.175 Royal Prince Albert Alfred Hospital

NOTE Confidence: 0.866716220526316

00:01:06.175 --> 00:01:07.353 in Camperdown, Australia,

NOTE Confidence: 0.866716220526316

 $00:01:07.353 \longrightarrow 00:01:08.965$ and she's clinical associate

NOTE Confidence: 0.866716220526316

00:01:08.965 --> 00:01:10.980 professor at Central Clinical School,

NOTE Confidence: 0.866716220526316

 $00:01:10.980 \longrightarrow 00:01:12.033$ University of Sydney.

NOTE Confidence: 0.866716220526316

00:01:12.033 --> 00:01:13.788 Doctor Piper received her Bachelor

NOTE Confidence: 0.866716220526316

 $00:01:13.788 \longrightarrow 00:01:15.626$ of Applied Science and Physiotherapy

NOTE Confidence: 0.866716220526316

00:01:15.626 --> 00:01:17.431 at Cumberland College of Health

NOTE Confidence: 0.866716220526316

 $00:01:17.431 \longrightarrow 00:01:19.308$ Sciences at University of Sydney.

NOTE Confidence: 0.866716220526316

 $00:01:19.310 \longrightarrow 00:01:22.173$ her Master of Education at University of NSW,

NOTE Confidence: 0.866716220526316

00:01:22.173 --> 00:01:25.134 and her PhD in medicine at University

NOTE Confidence: 0.866716220526316 00:01:25.134 --> 00:01:25.980 of Sydney. NOTE Confidence: 0.866716220526316 $00:01:25.980 \longrightarrow 00:01:28.234$ Doctor Piper is considered one of the

NOTE Confidence: 0.866716220526316

 $00{:}01{:}28.234 \dashrightarrow 00{:}01{:}30.080$ foremost clinicians in assessment and

NOTE Confidence: 0.866716220526316

 $00:01:30.080 \longrightarrow 00:01:31.732$ management of hypercapnic respiratory

NOTE Confidence: 0.866716220526316

 $00:01:31.732 \longrightarrow 00:01:34.299$ failure and non invasive ventilation use.

NOTE Confidence: 0.866716220526316

 $00:01:34.300 \longrightarrow 00:01:36.484$ She has an extensive publication record

NOTE Confidence: 0.866716220526316

00:01:36.484 --> 00:01:38.418 over 100 peer reviewed publications

NOTE Confidence: 0.866716220526316

 $00{:}01{:}38.418 \dashrightarrow 00{:}01{:}40.920$ and book chapters on diverse topics

NOTE Confidence: 0.866716220526316

 $00:01:40.920 \longrightarrow 00:01:43.170$ related to respiratory muscle weakness,

NOTE Confidence: 0.866716220526316

00:01:43.170 --> 00:01:44.438 monitoring of sleep disordered

NOTE Confidence: 0.866716220526316

 $00:01:44.438 \longrightarrow 00:01:46.771$ breathing and the use of an Ivy

NOTE Confidence: 0.866716220526316

 $00:01:46.771 \longrightarrow 00:01:48.259$ in multiple clinical settings.

NOTE Confidence: 0.866716220526316

 $00:01:48.260 \longrightarrow 00:01:50.468$ She's been a keynote or guest

NOTE Confidence: 0.866716220526316

 $00:01:50.468 \longrightarrow 00:01:51.940$ speaker at multiple international

NOTE Confidence: 0.866716220526316

 $00:01:52.003 \longrightarrow 00:01:54.385$ and national meetings and she served

NOTE Confidence: 0.866716220526316

 $00:01:54.385 \longrightarrow 00:01:55.973$ on multiple clinical guideline.

NOTE Confidence: 0.866716220526316

00:01:55.980 --> 00:01:57.044 Writing groups,

00:01:57.044 --> 00:02:00.236 including most recently the ATS obesity

NOTE Confidence: 0.866716220526316

 $00:02:00.236 \longrightarrow 00:02:02.344$ hypoventilation guidelines and the ATS

NOTE Confidence: 0.866716220526316

00:02:02.344 --> 00:02:04.612 home in Ivy for stable CPT guidelines.

NOTE Confidence: 0.866716220526316

 $00:02:04.620 \longrightarrow 00:02:05.980$ She is an active educator.

NOTE Confidence: 0.866716220526316

 $00{:}02{:}05.980 \dashrightarrow 00{:}02{:}08.800$ She's currently supervising 5 PhD

NOTE Confidence: 0.866716220526316

 $00:02:08.800 \longrightarrow 00:02:11.620$ students and two physiotherapy students.

NOTE Confidence: 0.866716220526316

00:02:11.620 --> 00:02:13.906 Her research centers on non invasive

NOTE Confidence: 0.866716220526316

 $00:02:13.906 \longrightarrow 00:02:15.899$ ventilation and other treatments in

NOTE Confidence: 0.866716220526316

00:02:15.899 --> 00:02:17.969 patients with chronic respiratory failure.

NOTE Confidence: 0.866716220526316

 $00:02:17.970 \longrightarrow 00:02:20.294$ She has been a primary or Co

NOTE Confidence: 0.866716220526316

 $00:02:20.294 \longrightarrow 00:02:21.667$ investigator in numerous clinical

NOTE Confidence: 0.866716220526316

00:02:21.667 --> 00:02:23.809 trials but just to name a few,

NOTE Confidence: 0.866716220526316

 $00{:}02{:}23.810 --> 00{:}02{:}25.395$ the role of Don invasive

NOTE Confidence: 0.866716220526316

 $00:02:25.395 \longrightarrow 00:02:26.346$ ventilation in exercise.

NOTE Confidence: 0.866716220526316

 $00:02:26.350 \longrightarrow 00:02:27.682$ Training and rehab.

00:02:27.682 --> 00:02:29.458 Patients with chronic hypercapnic

NOTE Confidence: 0.866716220526316

 $00:02:29.458 \longrightarrow 00:02:31.483$ respiratory failure evaluation of different

NOTE Confidence: 0.866716220526316

 $00:02:31.483 \longrightarrow 00:02:33.784$ PAT modalities in the management of OHS.

NOTE Confidence: 0.866716220526316

 $00:02:33.784 \longrightarrow 00:02:35.754$ The effect of oxygen therapy

NOTE Confidence: 0.866716220526316

 $00:02:35.754 \longrightarrow 00:02:37.330$ on breathing in OHS,

NOTE Confidence: 0.866716220526316

 $00:02:37.330 \longrightarrow 00:02:39.594$ the use of NIV as an adjunct to

NOTE Confidence: 0.866716220526316

 $00:02:39.594 \longrightarrow 00:02:40.810$ secretion clearance in patients

NOTE Confidence: 0.866716220526316

 $00{:}02{:}40.810 \dashrightarrow 00{:}02{:}42.280$ with Bronchiectasis and the use

NOTE Confidence: 0.866716220526316

 $00{:}02{:}42.280 \dashrightarrow 00{:}02{:}44.585$ of an Ivy and oxygen in patients

NOTE Confidence: 0.866716220526316

00:02:44.585 --> 00:02:45.945 with motor neuron disease.

NOTE Confidence: 0.866716220526316 00:02:45.950 --> 00:02:46.728 In 2021, NOTE Confidence: 0.866716220526316

 $00:02:46.728 \longrightarrow 00:02:48.673$ she received a very prestigious

NOTE Confidence: 0.866716220526316

 $00{:}02{:}48.673 \dashrightarrow 00{:}02{:}50.812$ honorary member title to the

NOTE Confidence: 0.866716220526316

00:02:50.812 --> 00:02:52.168 European Respiratory Society,

NOTE Confidence: 0.866716220526316

 $00:02:52.170 \longrightarrow 00:02:53.625$ which is awarded to only

NOTE Confidence: 0.866716220526316

 $00{:}02{:}53.625 \dashrightarrow 00{:}02{:}54.789$ two individuals per year.

00:02:54.790 --> 00:02:56.385 In recognition for both her

NOTE Confidence: 0.866716220526316

 $00:02:56.385 \longrightarrow 00:02:58.326$ pioneering work in the effective use

NOTE Confidence: 0.866716220526316

 $00:02:58.326 \longrightarrow 00:03:00.060$ of an Ivy and respiratory failure,

NOTE Confidence: 0.850646987272727

 $00:03:00.060 \longrightarrow 00:03:01.956$ and also in the wide dissemination

NOTE Confidence: 0.850646987272727

 $00{:}03{:}01.956 \dashrightarrow 00{:}03{:}03.800$ of NID into clinical practice.

NOTE Confidence: 0.850646987272727

 $00:03:03.800 \longrightarrow 00:03:06.008$ So it's our distinct pleasure and

NOTE Confidence: 0.850646987272727

00:03:06.008 --> 00:03:08.154 honor to welcome Doctor Piper TL

NOTE Confidence: 0.850646987272727

 $00{:}03{:}08.154 \dashrightarrow 00{:}03{:}09.972$ today to discuss in's and outs

NOTE Confidence: 0.850646987272727

00:03:09.972 --> 00:03:11.850 of home ventilation welcome.

NOTE Confidence: 0.905267984285714

00:03:12.560 --> 00:03:15.216 Oh, thank you so much Janet for the

NOTE Confidence: 0.905267984285714

 $00:03:15.216 \longrightarrow 00:03:17.050$ introduction and thank you everybody

NOTE Confidence: 0.905267984285714

 $00:03:17.050 \longrightarrow 00:03:19.316$ for for turning up and so good

NOTE Confidence: 0.905267984285714

 $00{:}03{:}19.316 \dashrightarrow 00{:}03{:}21.451$ after noon as you heard it is good

NOTE Confidence: 0.905267984285714

00:03:21.451 --> 00:03:23.908 morning for me just to begin with.

NOTE Confidence: 0.905267984285714

 $00:03:23.908 \longrightarrow 00:03:26.380$ I do have some financial disclosures.

 $00:03:26.380 \longrightarrow 00:03:28.851$ I have given talks for on behalf

NOTE Confidence: 0.905267984285714

 $00:03:28.851 \longrightarrow 00:03:31.483$ of Power Phillips in the last 12

NOTE Confidence: 0.905267984285714

 $00:03:31.483 \longrightarrow 00:03:33.353$ months and during the presentation

NOTE Confidence: 0.905267984285714

 $00:03:33.353 \longrightarrow 00:03:35.662$ you will see pictures of equipment

NOTE Confidence: 0.905267984285714

 $00:03:35.662 \longrightarrow 00:03:38.314$ from both Phillips and Res Med.

NOTE Confidence: 0.905267984285714

 $00:03:38.320 \longrightarrow 00:03:40.260$ They are the devices that

NOTE Confidence: 0.905267984285714

 $00:03:40.260 \longrightarrow 00:03:42.082$ we have most access to.

NOTE Confidence: 0.905267984285714

 $00:03:42.082 \longrightarrow 00:03:43.386$ Here in this country,

NOTE Confidence: 0.905267984285714

 $00:03:43.390 \longrightarrow 00:03:46.423$ and I think probably in the states as well.

NOTE Confidence: 0.905267984285714

 $00:03:46.430 \longrightarrow 00:03:47.926$ So as you heard,

NOTE Confidence: 0.905267984285714

 $00:03:47.926 \longrightarrow 00:03:51.708$ I'm from as Camperdown is a suburb of Sydney.

NOTE Confidence: 0.905267984285714

 $00:03:51.710 \longrightarrow 00:03:53.894$ This is a picture of the center

NOTE Confidence: 0.905267984285714

00:03:53.894 --> 00:03:56.739 of a Sydney and if you have a look

NOTE Confidence: 0.905267984285714

 $00:03:56.739 \longrightarrow 00:03:58.964$ that little red circle up in the

NOTE Confidence: 0.905267984285714

 $00:03:58.964 \longrightarrow 00:04:00.920$ left hand corner is our hospital

NOTE Confidence: 0.905267984285714

 $00:04:00.995 \longrightarrow 00:04:02.927$ Royal Prince Alfred Hospital.

 $00:04:02.930 \longrightarrow 00:04:04.568$ So this is another view of it.

NOTE Confidence: 0.905267984285714

 $00:04:04.570 \longrightarrow 00:04:07.832$ So here is our hospital in the

NOTE Confidence: 0.905267984285714

00:04:07.832 --> 00:04:09.956 middle top panel looking back.

NOTE Confidence: 0.905267984285714

 $00:04:09.956 \longrightarrow 00:04:12.134$ Seeing the city there and it's

NOTE Confidence: 0.905267984285714

 $00:04:12.134 \longrightarrow 00:04:13.660$ an interesting combination.

NOTE Confidence: 0.905267984285714

00:04:13.660 --> 00:04:18.012 A very old hospital built in the 1880s

NOTE Confidence: 0.905267984285714

00:04:18.012 --> 00:04:21.540 which is old for Australia and some very new,

NOTE Confidence: 0.905267984285714

 $00{:}04{:}21.540 \dashrightarrow 00{:}04{:}25.124$ has a clinical services block and we are

NOTE Confidence: 0.905267984285714

 $00:04:25.124 \longrightarrow 00:04:28.737$ back on to the University of Sydney.

NOTE Confidence: 0.905267984285714

 $00{:}04{:}28.740 \dashrightarrow 00{:}04{:}31.316$ So what I wanted to cover today

NOTE Confidence: 0.905267984285714

 $00:04:31.316 \longrightarrow 00:04:34.177$ is really just talk about what the

NOTE Confidence: 0.905267984285714

 $00:04:34.177 \longrightarrow 00:04:36.679$ goals of bilevel therapy are and

NOTE Confidence: 0.905267984285714

 $00{:}04{:}36.759 \dashrightarrow 00{:}04{:}38.380$ really looking at it from sort of,

NOTE Confidence: 0.905267984285714 00:04:38.380 --> 00:04:38.912 you know, NOTE Confidence: 0.905267984285714

 $00:04:38.912 \longrightarrow 00:04:41.040$ the in and out of how we should

00:04:41.108 --> 00:04:43.663 be managing or thinking about

NOTE Confidence: 0.905267984285714

 $00:04:43.663 \longrightarrow 00:04:45.196$ managing noninvasive ventilation.

NOTE Confidence: 0.905267984285714

 $00:04:45.200 \longrightarrow 00:04:47.918$ So I'm going to primarily concentrate

NOTE Confidence: 0.905267984285714

 $00:04:47.918 \longrightarrow 00:04:51.602$ on settings and that for patients with

NOTE Confidence: 0.905267984285714

00:04:51.602 --> 00:04:53.679 neuromuscular conditions and COPD,

NOTE Confidence: 0.905267984285714

 $00:04:53.679 \longrightarrow 00:04:55.353$ and you'll see why shortly and

NOTE Confidence: 0.905267984285714

00:04:55.353 --> 00:04:57.238 also talk a little bit about,

NOTE Confidence: 0.905267984285714

 $00:04:57.240 \longrightarrow 00:04:58.521$ you know automated.

NOTE Confidence: 0.905267984285714 00:04:58.521 --> 00:04:58.948 Therapy, NOTE Confidence: 0.905267984285714

 $00:04:58.948 \longrightarrow 00:05:02.067$ but I think also a topic that's

NOTE Confidence: 0.905267984285714

 $00{:}05{:}02.067 \dashrightarrow 00{:}05{:}04.407$ becoming more of interest around

NOTE Confidence: 0.905267984285714

 $00:05:04.407 \longrightarrow 00:05:07.522$ the world is where we should be

NOTE Confidence: 0.905267984285714

 $00:05:07.522 \longrightarrow 00:05:10.006$ locating the acclamation to the rapy in

NOTE Confidence: 0.905267984285714

 $00:05:10.006 \longrightarrow 00:05:12.269$ individuals with sleep hypoventilation.

NOTE Confidence: 0.905267984285714

 $00:05:12.270 \longrightarrow 00:05:15.570$ So the inpatient versus the outpatient

NOTE Confidence: 0.905267984285714

 $00{:}05{:}15.570 \dashrightarrow 00{:}05{:}20.016$ in lab with PSG in the home or in

 $00:05:20.016 \longrightarrow 00:05:22.774$ hospital situations and then talking

NOTE Confidence: 0.905267984285714

 $00:05:22.774 \longrightarrow 00:05:25.604$ about ongoing titration and monitoring.

NOTE Confidence: 0.905267984285714

 $00:05:25.610 \longrightarrow 00:05:28.338$ And I think some caveats before I start.

NOTE Confidence: 0.905267984285714

 $00:05:28.340 \longrightarrow 00:05:30.728$ First of all, uh, Australia is

NOTE Confidence: 0.905267984285714

 $00:05:30.728 \longrightarrow 00:05:34.009$ roughly the same size as the contiguous US,

NOTE Confidence: 0.905267984285714

 $00:05:34.010 \longrightarrow 00:05:37.730$ so we are a large country,

NOTE Confidence: 0.905267984285714

 $00:05:37.730 \longrightarrow 00:05:39.400$ a small, very small continent.

NOTE Confidence: 0.905267984285714

 $00:05:39.400 \longrightarrow 00:05:40.750$ Very large country,

NOTE Confidence: 0.905267984285714

 $00:05:40.750 \longrightarrow 00:05:43.450$ but we have very different populations

NOTE Confidence: 0.905267984285714

 $00{:}05{:}43.450 \longrightarrow 00{:}05{:}46.148$ are compared to the United States,

NOTE Confidence: 0.905267984285714

00:05:46.150 --> 00:05:47.774 so you know you have it roughly.

NOTE Confidence: 0.905267984285714

00:05:47.780 --> 00:05:51.300 You know 10 times our population at least,

NOTE Confidence: 0.905267984285714

 $00:05:51.300 \longrightarrow 00:05:54.720$ and that has a lot of implications for us,

NOTE Confidence: 0.905267984285714

 $00:05:54.720 \longrightarrow 00:05:55.899$ and you know,

NOTE Confidence: 0.905267984285714

 $00:05:55.899 \longrightarrow 00:05:58.650$ and the information that I gleaned from.

 $00:05:58.650 \longrightarrow 00:06:01.026$ The literature and what we do in terms of

NOTE Confidence: 0.905267984285714

 $00{:}06{:}01.026 \dashrightarrow 00{:}06{:}03.709$ our population density and the travel times.

NOTE Confidence: 0.905267984285714

 $00:06:03.710 \longrightarrow 00:06:06.146$ A lot of our patients have in

NOTE Confidence: 0.905267984285714

 $00:06:06.146 \longrightarrow 00:06:08.960$ coming to see us and the barriers

NOTE Confidence: 0.905267984285714

 $00:06:08.960 \longrightarrow 00:06:11.486$ to therapy because of that very,

NOTE Confidence: 0.905267984285714

 $00:06:11.490 \longrightarrow 00:06:13.332$ very sparse population.

NOTE Confidence: 0.905267984285714

00:06:13.332 --> 00:06:18.050 So most of uh of Australians 50% live

NOTE Confidence: 0.905267984285714

00:06:18.050 --> 00:06:20.990 between what's Brisbane marked on this map,

NOTE Confidence: 0.905267984285714

 $00:06:20.990 \longrightarrow 00:06:23.573$ which is sort of the center of the right

NOTE Confidence: 0.905267984285714

 $00:06:23.573 \longrightarrow 00:06:26.487$ hand side of the continent down to Melbourne.

NOTE Confidence: 0.905267984285714

 $00{:}06{:}26.490 \dashrightarrow 00{:}06{:}29.988$ So 50% of the Australian population.

NOTE Confidence: 0.905267984285714

 $00:06:29.990 \longrightarrow 00:06:31.935$ Living within that region and

NOTE Confidence: 0.905267984285714

 $00:06:31.935 \longrightarrow 00:06:33.880$ so a lot of the

NOTE Confidence: 0.867341927333333

 $00:06:33.972 \longrightarrow 00:06:36.148$ country is made up of individuals

NOTE Confidence: 0.867341927333333

 $00:06:36.148 \longrightarrow 00:06:37.938$ that you can see below,

NOTE Confidence: 0.867341927333333

 $00:06:37.940 \longrightarrow 00:06:39.504$ like this kangaroo and

 $00:06:39.504 \longrightarrow 00:06:41.850$ lots and lots of you know,

NOTE Confidence: 0.867341927333333

 $00{:}06{:}41.850 \dashrightarrow 00{:}06{:}45.338$ open space what we call the red Center.

NOTE Confidence: 0.867341927333333

 $00:06:45.340 \longrightarrow 00:06:48.388$ The other obvious.

NOTE Confidence: 0.867341927333333

 $00:06:48.390 \longrightarrow 00:06:50.490$ Implication and how to interpret some

NOTE Confidence: 0.867341927333333

 $00:06:50.490 \longrightarrow 00:06:53.115$ of this stuff that I'm talking about

NOTE Confidence: 0.867341927333333

 $00:06:53.115 \longrightarrow 00:06:55.437$ is the huge difference in healthcare

NOTE Confidence: 0.867341927333333

 $00:06:55.437 \longrightarrow 00:06:57.296$ funding between our two areas.

NOTE Confidence: 0.867341927333333

 $00:06:57.296 \longrightarrow 00:07:00.092$ So in Australia we have the

NOTE Confidence: 0.867341927333333

 $00:07:00.092 \longrightarrow 00:07:01.574$ federal government collects taxes

NOTE Confidence: 0.867341927333333

 $00:07:01.574 \longrightarrow 00:07:03.478$ and then gives it to the state

NOTE Confidence: 0.867341927333333

00:07:03.478 --> 00:07:05.055 and territory governments who

NOTE Confidence: 0.867341927333333

 $00{:}07{:}05.055 \dashrightarrow 00{:}07{:}07.135$ actually run the hospital systems.

NOTE Confidence: 0.867341927333333

00:07:07.140 --> 00:07:09.688 We do have our private health insurers,

NOTE Confidence: 0.867341927333333

 $00{:}07{:}09.690 \dashrightarrow 00{:}07{:}11.940$ but they make up very much

NOTE Confidence: 0.867341927333333

 $00:07:11.940 \longrightarrow 00:07:13.959$ smaller proportion of the sort

 $00:07:13.959 \longrightarrow 00:07:15.747$ of healthcare that Australians

NOTE Confidence: 0.867341927333333

 $00{:}07{:}15.747 \dashrightarrow 00{:}07{:}18.560$ receive and very much like Canada.

NOTE Confidence: 0.867341927333333

 $00:07:18.560 \longrightarrow 00:07:21.351$ We have a universal health health

NOTE Confidence: 0.867341927333333

 $00:07:21.351 \longrightarrow 00:07:24.478$ insurance scheme which is means although

NOTE Confidence: 0.867341927333333

 $00:07:24.478 \longrightarrow 00:07:26.704$ we pay for it through our taxes,

NOTE Confidence: 0.867341927333333

 $00:07:26.710 \longrightarrow 00:07:28.124$ we can turn up to you know,

NOTE Confidence: 0.867341927333333

 $00:07:28.130 \longrightarrow 00:07:30.755$ any public hospital for any

NOTE Confidence: 0.867341927333333

 $00{:}07{:}30.755 \dashrightarrow 00{:}07{:}32.632$ condition and receive our free

NOTE Confidence: 0.867341927333333

 $00{:}07{:}32.632 \dashrightarrow 00{:}07{:}34.660$ care at that particular point and

NOTE Confidence: 0.867341927333333

 $00:07:34.722 \longrightarrow 00:07:36.850$ that includes outpatient services.

NOTE Confidence: 0.867341927333333

 $00{:}07{:}36.850 \dashrightarrow 00{:}07{:}39.790$ We also have subsidized medications,

NOTE Confidence: 0.867341927333333

 $00:07:39.790 \longrightarrow 00:07:42.380$ so when it comes to the provision

NOTE Confidence: 0.867341927333333

 $00:07:42.380 \longrightarrow 00:07:44.363$ of bilevel or ventilators in

NOTE Confidence: 0.867341927333333

00:07:44.363 --> 00:07:46.727 the state that I live in,

NOTE Confidence: 0.867341927333333

 $00:07:46.730 \longrightarrow 00:07:49.420$ it's funded through a specific.

NOTE Confidence: 0.867341927333333

 $00{:}07{:}49.420 \dashrightarrow 00{:}07{:}52.828$ NSW government body called Enable

 $00{:}07{:}52.828 \dashrightarrow 00{:}07{:}55.684$ where the criteria to get this

NOTE Confidence: 0.867341927333333

 $00:07:55.684 \longrightarrow 00:07:58.269$ equipment is largely evidence based

NOTE Confidence: 0.867341927333333

 $00:07:58.270 \longrightarrow 00:07:59.978$ with some clinical justification,

NOTE Confidence: 0.867341927333333

00:07:59.978 --> 00:08:02.113 so it's not particularly difficult

NOTE Confidence: 0.867341927333333

00:08:02.113 --> 00:08:03.985 to get equipment and patients

NOTE Confidence: 0.867341927333333

 $00:08:03.985 \longrightarrow 00:08:06.526$ don't have to pay for it.

NOTE Confidence: 0.867341927333333

 $00:08:06.526 \longrightarrow 00:08:07.822$ Apart from \$100.

NOTE Confidence: 0.867341927333333

 $00:08:07.822 \longrightarrow 00:08:10.614$ I think that it is a year as a

NOTE Confidence: 0.867341927333333

00:08:10.614 --> 00:08:12.474 an administration fee which will

NOTE Confidence: 0.867341927333333

 $00:08:12.474 \longrightarrow 00:08:14.863$ be waivered if they just claim

NOTE Confidence: 0.867341927333333

 $00:08:14.863 \longrightarrow 00:08:16.459$ they can't afford that.

NOTE Confidence: 0.867341927333333

 $00{:}08{:}16.460 \dashrightarrow 00{:}08{:}18.260$ Very different to the United States

NOTE Confidence: 0.867341927333333

00:08:18.260 --> 00:08:20.498 and I won't even try to get my

NOTE Confidence: 0.867341927333333

 $00{:}08{:}20.498 \dashrightarrow 00{:}08{:}22.114$ head around how your reimbursement

NOTE Confidence: 0.867341927333333

 $00:08:22.114 \longrightarrow 00:08:24.650$ and funding system works,

 $00:08:24.650 \longrightarrow 00:08:27.051$ but I think there are two interesting

NOTE Confidence: 0.867341927333333

 $00{:}08{:}27.051 \dashrightarrow 00{:}08{:}29.325$ papers which I haven't read all

NOTE Confidence: 0.867341927333333

 $00:08:29.325 \longrightarrow 00:08:31.665$ the way through because it's not

NOTE Confidence: 0.867341927333333

00:08:31.665 --> 00:08:33.379 pertinent to my situation but

NOTE Confidence: 0.867341927333333

 $00:08:33.380 \longrightarrow 00:08:36.140$ that big Mccleskey and Nikhil or

NOTE Confidence: 0.867341927333333

00:08:36.140 --> 00:08:38.580 written papers talking uh with

NOTE Confidence: 0.867341927333333

 $00:08:38.580 \longrightarrow 00:08:41.160$ some results from their technical

NOTE Confidence: 0.867341927333333

00:08:41.160 --> 00:08:44.008 expert panel report trying to look

NOTE Confidence: 0.867341927333333

 $00:08:44.008 \longrightarrow 00:08:46.472$ at how to improve the access to.

NOTE Confidence: 0.867341927333333

00:08:46.480 --> 00:08:47.804 Bilevel devices for patients

NOTE Confidence: 0.867341927333333

 $00:08:47.804 \longrightarrow 00:08:49.459$ with various types of sleep,

NOTE Confidence: 0.867341927333333

 $00:08:49.460 \longrightarrow 00:08:50.882$ hypoventilation in particular,

NOTE Confidence: 0.867341927333333

 $00{:}08{:}50.882 \dashrightarrow 00{:}08{:}53.252$ getting easier access to the

NOTE Confidence: 0.867341927333333

 $00:08:53.252 \longrightarrow 00:08:55.320$ St modes of ventilation,

NOTE Confidence: 0.867341927333333

 $00:08:55.320 \longrightarrow 00:08:57.780$ because certainly there's increasing

NOTE Confidence: 0.867341927333333

00:08:57.780 --> 00:09:00.380 evidence that this can be quite useful,

00:09:00.380 --> 00:09:02.424 particularly in patients with

NOTE Confidence: 0.867341927333333

 $00:09:02.424 \longrightarrow 00:09:05.620$ with things like COPD.

NOTE Confidence: 0.867341927333333

 $00:09:05.620 \longrightarrow 00:09:06.905$ So when we think about

NOTE Confidence: 0.867341927333333

 $00:09:06.905 \longrightarrow 00:09:07.676$ non invasive ventilation,

NOTE Confidence: 0.867341927333333

 $00:09:07.680 \longrightarrow 00:09:10.480$ we have to think about what we're trying

NOTE Confidence: 0.867341927333333

 $00:09:10.480 \longrightarrow 00:09:13.038$ to achieve and obviously you know we.

NOTE Confidence: 0.867341927333333

 $00:09:13.040 \longrightarrow 00:09:14.768$ We think about improving gas exchange

NOTE Confidence: 0.867341927333333

 $00:09:14.768 \longrightarrow 00:09:16.780$ to not only when there is sleep,

NOTE Confidence: 0.867341927333333

00:09:16.780 --> 00:09:18.440 but hopefully they've already

NOTE Confidence: 0.867341927333333

 $00:09:18.440 \longrightarrow 00:09:20.100$ inhabit Catholic respiratory failure.

NOTE Confidence: 0.867341927333333

00:09:20.100 --> 00:09:22.156 Reversing that daytime respiratory

NOTE Confidence: 0.867341927333333

 $00:09:22.156 \longrightarrow 00:09:24.726$ failure primarily by preventing or

NOTE Confidence: 0.867341927333333

 $00{:}09{:}24.726 \dashrightarrow 00{:}09{:}26.979$ minimizing abnormal breathing events,

NOTE Confidence: 0.867341927333333

 $00:09:26.980 \longrightarrow 00:09:27.866$ chilling sleep,

NOTE Confidence: 0.867341927333333

 $00:09:27.866 \longrightarrow 00:09:30.967$ and at the same time trying to

 $00:09:30.967 \longrightarrow 00:09:32.970$ facilitate uninterrupted sleep

NOTE Confidence: 0.867341927333333

 $00:09:32.970 \longrightarrow 00:09:34.260$ from a patient's point of view,

NOTE Confidence: 0.867341927333333

 $00:09:34.260 \longrightarrow 00:09:35.630$ they really want to have.

NOTE Confidence: 0.867341927333333

00:09:35.630 --> 00:09:37.235 Relief that their symptoms and

NOTE Confidence: 0.867341927333333

 $00:09:37.235 \longrightarrow 00:09:39.160$ improvement in their quality of life.

NOTE Confidence: 0.867341927333333

 $00:09:39.160 \longrightarrow 00:09:42.130$ And often this is around

NOTE Confidence: 0.867341927333333

00:09:42.130 --> 00:09:43.318 reducing hospitalizations,

NOTE Confidence: 0.867341927333333

 $00:09:43.320 \longrightarrow 00:09:45.240$ and if we are going to

NOTE Confidence: 0.867341927333333

 $00:09:45.240 \longrightarrow 00:09:46.200$ treat these individuals,

NOTE Confidence: 0.867341927333333

 $00:09:46.200 \longrightarrow 00:09:51.044$ we want to extend meaningful past survival.

NOTE Confidence: 0.867341927333333

00:09:51.050 --> 00:09:52.690 When it comes to the rapy,

NOTE Confidence: 0.867341927333333

 $00:09:52.690 \longrightarrow 00:09:54.976$ there's a whole range of different

NOTE Confidence: 0.867341927333333

 $00:09:54.976 \longrightarrow 00:09:58.125$ machines that we can use from very simple

NOTE Confidence: 0.867341927333333

00:09:58.125 --> 00:10:00.453 bilevel devices to the more complex

NOTE Confidence: 0.860185861666667

 $00:10:00.525 \longrightarrow 00:10:02.117$ home high end machines.

NOTE Confidence: 0.860185861666667

 $00:10:02.120 \longrightarrow 00:10:03.975$ There's a whole range of

 $00:10:03.975 \longrightarrow 00:10:06.130$ masks that we have access to,

NOTE Confidence: 0.860185861666667

 $00:10:06.130 \longrightarrow 00:10:07.966$ as well as thinking about the

NOTE Confidence: 0.860185861666667

00:10:07.966 --> 00:10:09.656 primary settings on the machines

NOTE Confidence: 0.860185861666667

 $00:10:09.656 \longrightarrow 00:10:11.676$ and the different machines there,

NOTE Confidence: 0.860185861666667

 $00:10:11.680 \longrightarrow 00:10:13.927$ and silly settings that we should be

NOTE Confidence: 0.860185861666667

00:10:13.927 --> 00:10:16.299 using to try and match better what

NOTE Confidence: 0.860185861666667

 $00:10:16.299 \longrightarrow 00:10:18.849$ the machine is doing and what the

NOTE Confidence: 0.860185861666667

 $00{:}10{:}18.849 \dashrightarrow 00{:}10{:}20.737$ patients ventilator demands are.

NOTE Confidence: 0.860185861666667

 $00{:}10{:}20.740 \dashrightarrow 00{:}10{:}23.268$ So getting noninvasive ventilation

NOTE Confidence: 0.860185861666667

 $00:10:23.268 \longrightarrow 00:10:26.868$ right is very much about picking

NOTE Confidence: 0.860185861666667

00:10:26.868 --> 00:10:29.496 the right patient under the right

NOTE Confidence: 0.860185861666667

 $00{:}10{:}29.496 \dashrightarrow 00{:}10{:}31.540$ circumstances at the right time

NOTE Confidence: 0.860185861666667

 $00{:}10{:}31.540 \dashrightarrow 00{:}10{:}33.540$ and using the most appropriate

NOTE Confidence: 0.860185861666667

 $00:10:33.540 \longrightarrow 00:10:35.948$ and right equipment for them.

NOTE Confidence: 0.860185861666667

00:10:35.950 --> 00:10:38.344 And when we look at some of the stuff

00:10:38.344 --> 00:10:40.499 that is coming out from from Europe,

NOTE Confidence: 0.860185861666667

 $00:10:40.499 \longrightarrow 00:10:41.237$ for instance,

NOTE Confidence: 0.860185861666667

00:10:41.237 --> 00:10:44.409 you can see over the last two decades

NOTE Confidence: 0.860185861666667

00:10:44.409 --> 00:10:47.493 the increasing use of non invasive

NOTE Confidence: 0.860185861666667

 $00:10:47.493 \longrightarrow 00:10:50.048$ ventilation being prescribed for the home.

NOTE Confidence: 0.860185861666667

 $00:10:50.050 \longrightarrow 00:10:52.528$ So from the anti dear our database

NOTE Confidence: 0.860185861666667

 $00:10:52.528 \longrightarrow 00:10:55.212$ which is a very extensive database

NOTE Confidence: 0.860185861666667

00:10:55.212 --> 00:10:58.660 from the French you can see in the

NOTE Confidence: 0.860185861666667

00:10:58.660 --> 00:11:00.188 management of chronic respiratory

NOTE Confidence: 0.860185861666667

00:11:00.188 --> 00:11:03.009 failure over the last two decades at this

NOTE Confidence: 0.860185861666667

 $00{:}11{:}03.009 \dashrightarrow 00{:}11{:}05.618$ marked reduction in treating these patients.

NOTE Confidence: 0.860185861666667

 $00{:}11{:}05.620 \to 00{:}11{:}09.976$ With oxygen therapy alone fairly steady.

NOTE Confidence: 0.860185861666667

00:11:09.980 --> 00:11:12.518 Centage of patients still receiving CPAP,

NOTE Confidence: 0.860185861666667

 $00:11:12.520 \longrightarrow 00:11:15.670$ but the increasing number of patients

NOTE Confidence: 0.860185861666667

 $00:11:15.670 \longrightarrow 00:11:17.770$ receiving noninvasive ventilation either

NOTE Confidence: 0.860185861666667

 $00{:}11{:}17.841 \dashrightarrow 00{:}11{:}21.539$ with without supplemental oxygen.

 $00:11:21.540 \longrightarrow 00:11:23.835$ And similarly a very recent

NOTE Confidence: 0.860185861666667

00:11:23.835 --> 00:11:26.130 study looking out of Switzerland

NOTE Confidence: 0.860185861666667

00:11:26.210 --> 00:11:28.660 looking around Lake Geneva area,

NOTE Confidence: 0.860185861666667

 $00:11:28.660 \longrightarrow 00:11:31.775$ just showing that over the last two

NOTE Confidence: 0.860185861666667

 $00{:}11{:}31.775 \dashrightarrow 00{:}11{:}34.075$ decades the increasing number of

NOTE Confidence: 0.860185861666667

00:11:34.075 --> 00:11:37.208 patients with COPD which were being

NOTE Confidence: 0.860185861666667

 $00:11:37.208 \longrightarrow 00:11:39.456$ prescribed non invasive ventilation

NOTE Confidence: 0.860185861666667

 $00:11:39.460 \longrightarrow 00:11:42.610$ reducing numbers of patients with

NOTE Confidence: 0.860185861666667

 $00{:}11{:}42.610 \dashrightarrow 00{:}11{:}45.660$ LHS receiving CPAP rather than non

NOTE Confidence: 0.860185861666667

 $00:11:45.660 \longrightarrow 00:11:48.654$ invasive ventilation and the numbers of

NOTE Confidence: 0.860185861666667

 $00:11:48.654 \longrightarrow 00:11:51.630$ patients with neuromuscular disease has been.

NOTE Confidence: 0.860185861666667

 $00:11:51.630 \longrightarrow 00:11:52.534$ Relatively steady.

NOTE Confidence: 0.860185861666667

 $00:11:52.534 \longrightarrow 00:11:55.698$ And this is before we've had the

NOTE Confidence: 0.860185861666667

 $00:11:55.698 \longrightarrow 00:11:58.181$ two guidelines regarding COPD

NOTE Confidence: 0.860185861666667

00:11:58.181 --> 00:12:00.288 and play chess come out out from

00:12:00.288 --> 00:12:01.979 the American Thoracic Society.

NOTE Confidence: 0.860185861666667

 $00:12:01.980 \longrightarrow 00:12:05.920$ And also some guidelines regarding

NOTE Confidence: 0.860185861666667

 $00:12:05.920 \longrightarrow 00:12:08.476$ COPD from the European Sports Society.

NOTE Confidence: 0.860185861666667

00:12:08.480 --> 00:12:11.679 So we would sort of expect particularly

NOTE Confidence: 0.860185861666667

 $00:12:11.679 \longrightarrow 00:12:15.087$ around COPD increasing members so

NOTE Confidence: 0.860185861666667

00:12:15.087 --> 00:12:16.396 I don't have to tell this group.

NOTE Confidence: 0.860185861666667

 $00:12:16.400 \longrightarrow 00:12:18.926$ You know the importance of the

NOTE Confidence: 0.860185861666667

 $00:12:18.926 \longrightarrow 00:12:20.610$ physiological changes that occur

NOTE Confidence: 0.860185861666667

 $00{:}12{:}20.681 --> 00{:}12{:}21.549 \ \mathrm{during \ sleep},$

NOTE Confidence: 0.860185861666667

00:12:21.550 --> 00:12:23.770 which lead to increased upper airway.

NOTE Confidence: 0.860185861666667

 $00{:}12{:}23.770 \dashrightarrow 00{:}12{:}26.722$ Resistance or reductions in the spiritual

NOTE Confidence: 0.860185861666667

 $00{:}12{:}26.722 \dashrightarrow 00{:}12{:}30.139$ muscle turn and reduced chemo sensitivity,

NOTE Confidence: 0.860185861666667

 $00:12:30.140 \longrightarrow 00:12:34.022$ or reducing the potential for reduced

NOTE Confidence: 0.860185861666667

 $00:12:34.022 \longrightarrow 00:12:36.610$ minute ventilation and alveolar

NOTE Confidence: 0.860185861666667

00:12:36.711 --> 00:12:39.972 ventilation in patients with COPDV

NOTE Confidence: 0.860185861666667

 $00:12:39.972 \longrightarrow 00:12:42.500$ city hyperventilation and those

 $00:12:42.500 \longrightarrow 00:12:44.396$ with neuromuscular conditions.

NOTE Confidence: 0.860185861666667

 $00:12:44.400 \longrightarrow 00:12:46.368$ When we're applying on the basis

NOTE Confidence: 0.860185861666667

 $00:12:46.368 \longrightarrow 00:12:47.024$ of ventilation,

NOTE Confidence: 0.860185861666667

 $00:12:47.030 \longrightarrow 00:12:49.375$ we now have the opportunity to try

NOTE Confidence: 0.860185861666667

00:12:49.375 --> 00:12:52.378 and control that the upper airway,

NOTE Confidence: 0.860185861666667

 $00{:}12{:}52.378 \dashrightarrow 00{:}12{:}54.706$ increase resistance or collapse.

NOTE Confidence: 0.860185861666667

 $00:12:54.710 \longrightarrow 00:12:57.878$ We have the inspiratory.

NOTE Confidence: 0.860185861666667

 $00:12:57.880 \longrightarrow 00:13:01.060$ Trisha support to try to improve

NOTE Confidence: 0.860185861666667

 $00:13:01.060 \longrightarrow 00:13:01.760$ title volumes.

NOTE Confidence: 0.860185861666667

 $00:13:01.760 \longrightarrow 00:13:04.979$ And we have the ability to add a backup

NOTE Confidence: 0.860185861666667

00:13:04.979 --> 00:13:07.429 rate all with the aim of increasing

NOTE Confidence: 0.860185861666667

 $00:13:07.429 \longrightarrow 00:13:10.029$ alveolar ventilation in these individuals.

NOTE Confidence: 0.860185861666667

 $00{:}13{:}10.030 \dashrightarrow 00{:}13{:}13.097$ But we should never forget that there

NOTE Confidence: 0.860185861666667

 $00:13:13.097 \longrightarrow 00:13:15.332$ is a bidirectional relationship between

NOTE Confidence: 0.860185861666667

 $00{:}13{:}15.332 \dashrightarrow 00{:}13{:}17.626$ sleep and non invasive ventilation

 $00:13:17.626 \longrightarrow 00:13:19.796$ in their non invasive ventilation

NOTE Confidence: 0.860185861666667

 $00{:}13{:}19.796 \dashrightarrow 00{:}13{:}22.339$ can be disrupted for sleep but

NOTE Confidence: 0.860185861666667

 $00:13:22.339 \longrightarrow 00:13:24.547$ it can also improve sleep quality

NOTE Confidence: 0.860185861666667

 $00:13:24.547 \longrightarrow 00:13:26.826$ but likewise sleep have different

NOTE Confidence: 0.860185861666667

 $00:13:26.826 \longrightarrow 00:13:28.874$ impacts on invasive ventilation.

NOTE Confidence: 0.860185861666667

 $00{:}13{:}28.880 \dashrightarrow 00{:}13{:}30.884$ Compared to the right from the

NOTE Confidence: 0.860185861666667

 $00:13:30.884 \longrightarrow 00:13:33.260$ state had when we have non invasive

NOTE Confidence: 0.860185861666667

 $00:13:33.260 \longrightarrow 00:13:35.065$ ventilation during sleep we can

NOTE Confidence: 0.860185861666667

 $00{:}13{:}35.065 \dashrightarrow 00{:}13{:}36.945$ see things like glottic closure

NOTE Confidence: 0.860185861666667

 $00:13:36.945 \longrightarrow 00:13:39.025$ with central events created by

NOTE Confidence: 0.860185861666667

 $00{:}13{:}39.025 \dashrightarrow 00{:}13{:}40.549$ noninvasive ventilation itself,

NOTE Confidence: 0.860185861666667

 $00:13:40.550 \longrightarrow 00:13:42.830$ which can have an impact on

NOTE Confidence: 0.860185861666667

 $00:13:42.830 \longrightarrow 00:13:44.350$ sleep and hints breathing,

NOTE Confidence: 0.860185861666667

 $00:13:44.350 \longrightarrow 00:13:46.552$ and we also have at any

NOTE Confidence: 0.860185861666667

00:13:46.552 --> 00:13:48.020 time during wakefulness or

NOTE Confidence: 0.824701636363636

 $00:13:48.099 \longrightarrow 00:13:51.280$ sleep. The potential to create patient

 $00:13:51.280 \longrightarrow 00:13:54.020$ ventilator asynchrony which can again

NOTE Confidence: 0.824701636363636

 $00:13:54.103 \longrightarrow 00:13:57.517$ impact the efficacy of ventilatory support.

NOTE Confidence: 0.824701636363636

 $00:13:57.520 \longrightarrow 00:13:59.336$ So if we start thinking about the inszoom

NOTE Confidence: 0.824701636363636

00:13:59.336 --> 00:14:01.000 outs of noninvasive ventillation,

NOTE Confidence: 0.824701636363636

 $00:14:01.000 \longrightarrow 00:14:04.010$ we have to start with inspiratory support.

NOTE Confidence: 0.824701636363636

00:14:04.010 --> 00:14:05.394 You know. And obviously,

NOTE Confidence: 0.824701636363636

 $00:14:05.394 \longrightarrow 00:14:08.158$ the higher that we set the iPad and

NOTE Confidence: 0.824701636363636

 $00:14:08.158 \longrightarrow 00:14:09.898$ epep difference, the more support

NOTE Confidence: 0.824701636363636

 $00:14:09.898 \longrightarrow 00:14:12.020$ the patient is going to receive.

NOTE Confidence: 0.824701636363636

00:14:12.020 --> 00:14:13.584 And in doing that,

NOTE Confidence: 0.824701636363636

00:14:13.584 --> 00:14:16.876 particularly if we have a a patient

NOTE Confidence: 0.824701636363636

 $00:14:16.876 \longrightarrow 00:14:20.216$ who is taking small breaths,

NOTE Confidence: 0.824701636363636

 $00{:}14{:}20.220 \dashrightarrow 00{:}14{:}22.467$ we're going to add by increasing

NOTE Confidence: 0.824701636363636

 $00:14:22.467 \longrightarrow 00:14:23.778$ their title volumes.

NOTE Confidence: 0.824701636363636

 $00:14:23.778 \longrightarrow 00:14:26.800$ We often can steady there breathing down,

 $00:14:26.800 \longrightarrow 00:14:28.555$ reduce their respiratory.

NOTE Confidence: 0.824701636363636

 $00:14:28.555 \longrightarrow 00:14:32.434$ Right and making far more comfortable with.

NOTE Confidence: 0.82470163636363600:14:32.434 --> 00:14:32.798 Surprisingly,

NOTE Confidence: 0.824701636363636

 $00:14:32.798 \longrightarrow 00:14:34.982$ sometimes with the higher pressures rather

NOTE Confidence: 0.824701636363636

 $00:14:34.982 \longrightarrow 00:14:36.972$ than the lower pressures the patient

NOTE Confidence: 0.824701636363636

 $00{:}14{:}36.972 \dashrightarrow 00{:}14{:}39.219$ needs to feel as though they're being

NOTE Confidence: 0.824701636363636

00:14:39.219 --> 00:14:41.099 adequately supported with each breath,

NOTE Confidence: 0.824701636363636

 $00:14:41.100 \longrightarrow 00:14:44.440$ particularly patients with COPD.

NOTE Confidence: 0.824701636363636

 $00:14:44.440 \longrightarrow 00:14:46.915$ So when we're looking at setting

NOTE Confidence: 0.824701636363636

00:14:46.915 --> 00:14:48.190 that inspiratory pressure,

NOTE Confidence: 0.824701636363636

 $00{:}14{:}48.190 \dashrightarrow 00{:}14{:}51.211$ we're looking at our ability to reduce

NOTE Confidence: 0.824701636363636

00:14:51.211 --> 00:14:53.242 the carbon dioxide because we've

NOTE Confidence: 0.824701636363636

 $00:14:53.242 \longrightarrow 00:14:55.297$ increasing our bill of ventilation.

NOTE Confidence: 0.824701636363636

00:14:55.300 --> 00:14:57.742 So generally we're trying to get

NOTE Confidence: 0.824701636363636

00:14:57.742 --> 00:15:00.059 that pressure support to a point

NOTE Confidence: 0.824701636363636

 $00{:}15{:}00.059 \dashrightarrow 00{:}15{:}02.237$ where we can generate a title,

00:15:02.240 --> 00:15:02.778 volume,

NOTE Confidence: 0.824701636363636

 $00:15:02.778 \longrightarrow 00:15:05.468$ and the patients asleep somewhere

NOTE Confidence: 0.824701636363636

00:15:05.468 --> 00:15:08.479 between six and eight goals for

NOTE Confidence: 0.824701636363636

00:15:08.480 --> 00:15:11.150 per kilogram of ideal body weight.

NOTE Confidence: 0.824701636363636

 $00:15:11.150 \longrightarrow 00:15:13.060$ For patients with a neuromuscular

NOTE Confidence: 0.824701636363636

 $00:15:13.060 \longrightarrow 00:15:14.588$ condition and between 8.

NOTE Confidence: 0.824701636363636

 $00:15:14.590 \longrightarrow 00:15:17.260$ Teacher bad at mills for kilogram

NOTE Confidence: 0.824701636363636

 $00:15:17.260 \longrightarrow 00:15:19.040$ per patient with COPD.

NOTE Confidence: 0.824701636363636

 $00:15:19.040 \dashrightarrow 00:15:23.000$ So here we are trying to reduce the CO2.

NOTE Confidence: 0.824701636363636

 $00:15:23.000 \longrightarrow 00:15:24.245$ Looking at nighttime.

NOTE Confidence: 0.824701636363636

 $00:15:24.245 \longrightarrow 00:15:27.626$ We want that nocturnal CO2 to be

NOTE Confidence: 0.824701636363636

 $00{:}15{:}27.626 \dashrightarrow 00{:}15{:}30.525$ at least the same as the awake

NOTE Confidence: 0.824701636363636

00:15:30.525 --> 00:15:32.280 CO2 or in many patients,

NOTE Confidence: 0.824701636363636

00:15:32.280 --> 00:15:33.570 particularly those that

NOTE Confidence: 0.824701636363636

00:15:33.570 --> 00:15:34.860 have daytime hypercapnia.

00:15:34.860 --> 00:15:38.244 We want to make it lower than the they're

NOTE Confidence: 0.824701636363636

 $00:15:38.244 \longrightarrow 00:15:41.630$ awake CO2 levels and in patients with COPD.

NOTE Confidence: 0.824701636363636

 $00:15:41.630 \longrightarrow 00:15:43.110$ Certainly there is evidence

NOTE Confidence: 0.824701636363636

 $00:15:43.110 \longrightarrow 00:15:44.590$ coming out that way.

NOTE Confidence: 0.824701636363636

00:15:44.590 --> 00:15:48.160 Really, painting the goal is a

NOTE Confidence: 0.824701636363636

 $00:15:48.160 \longrightarrow 00:15:51.860$ reduction in CO2 of about 20%.

NOTE Confidence: 0.824701636363636

 $00:15:51.860 \longrightarrow 00:15:54.884$ The outs of course refer to the

NOTE Confidence: 0.824701636363636

 $00:15:54.884 \longrightarrow 00:15:57.029$ impact pressure and you know.

NOTE Confidence: 0.824701636363636 00:15:57.030 --> 00:15:57.306 Again, NOTE Confidence: 0.824701636363636

00:15:57.306 --> 00:15:58.686 you know this group knows.

NOTE Confidence: 0.824701636363636

00:15:58.690 --> 00:16:01.616 You know we're using epact to prevent

NOTE Confidence: 0.824701636363636

00:16:01.616 --> 00:16:03.829 that airway closure or collapse,

NOTE Confidence: 0.824701636363636

 $00:16:03.830 \longrightarrow 00:16:05.490$ and particularly in patients

NOTE Confidence: 0.824701636363636

 $00{:}16{:}05.490 \dashrightarrow 00{:}16{:}07.980$ with things like be sitting with

NOTE Confidence: 0.824701636363636

 $00:16:08.053 \longrightarrow 00:16:09.734$ related hypoventilation overlap

NOTE Confidence: 0.824701636363636

 $00:16:09.734 \longrightarrow 00:16:12.744$ syndrome and certain patients with

 $00:16:12.744 \longrightarrow 00:16:14.980$ neuromuscular conditions as well.

NOTE Confidence: 0.824701636363636

 $00:16:14.980 \longrightarrow 00:16:18.144$ And the problem is that that upper

NOTE Confidence: 0.824701636363636

00:16:18.144 --> 00:16:20.564 airway aperture can change depending

NOTE Confidence: 0.824701636363636

 $00:16:20.564 \longrightarrow 00:16:23.510$ on sleep stage and body position.

NOTE Confidence: 0.824701636363636

 $00:16:23.510 \longrightarrow 00:16:25.995$ We can also use the pack for

NOTE Confidence: 0.824701636363636

 $00:16:25.995 \longrightarrow 00:16:27.060$ offsetting intrinsic peak.

NOTE Confidence: 0.824701636363636

00:16:27.060 --> 00:16:29.184 In patients with COPD trying to

NOTE Confidence: 0.824701636363636

 $00:16:29.184 \longrightarrow 00:16:31.360$ reduce the effort of breathing,

NOTE Confidence: 0.824701636363636

00:16:31.360 --> 00:16:34.132 they haven't and work of breathing

NOTE Confidence: 0.824701636363636

 $00:16:34.132 \longrightarrow 00:16:37.284$ and trying to prevent our unrewarded

NOTE Confidence: 0.824701636363636

00:16:37.284 --> 00:16:39.462 efforts that often patients with

NOTE Confidence: 0.824701636363636

 $00:16:39.462 \longrightarrow 00:16:41.820$ COPD can present with during long

NOTE Confidence: 0.824701636363636

 $00{:}16{:}41.896 \dashrightarrow 00{:}16{:}43.896$ invasive ventilation and they gain

NOTE Confidence: 0.824701636363636

 $00:16:43.896 \longrightarrow 00:16:46.580$ the ability to put these patients.

NOTE Confidence: 0.824701636363636

 $00:16:46.580 \longrightarrow 00:16:48.820$ At least from my experience.

 $00:16:48.820 \longrightarrow 00:16:51.039$ And I know some of the European

NOTE Confidence: 0.824701636363636

 $00{:}16{:}51.039 \dashrightarrow 00{:}16{:}52.774$ experience having a backup rate

NOTE Confidence: 0.824701636363636

00:16:52.774 --> 00:16:55.294 high enough where we just don't see

NOTE Confidence: 0.824701636363636

 $00:16:55.294 \longrightarrow 00:16:57.360$ unrewarded efforts. Because we're.

NOTE Confidence: 0.824701636363636

 $00:16:57.360 \longrightarrow 00:17:00.780$ Hoping to ensure each breath is

NOTE Confidence: 0.824701636363636

 $00:17:00.780 \longrightarrow 00:17:03.345$ being is being received by the

NOTE Confidence: 0.824701636363636

 $00:17:03.345 \longrightarrow 00:17:05.980$ patient when they make an effort.

NOTE Confidence: 0.824701636363636

 $00:17:05.980 \longrightarrow 00:17:08.860$ That's a pet. It is a fine balance.

NOTE Confidence: 0.824701636363636

 $00{:}17{:}08.860 \dashrightarrow 00{:}17{:}12.115$ We want enough to achieve the goals

NOTE Confidence: 0.824701636363636

00:17:12.115 --> 00:17:14.304 or preventing or offsetting intrinsic

NOTE Confidence: 0.824701636363636

 $00{:}17{:}14.304 \dashrightarrow 00{:}17{:}16.812$ people or preventing upper airway collapse.

NOTE Confidence: 0.824701636363636

 $00:17:16.820 \longrightarrow 00:17:19.144$ But we also want to make sure

NOTE Confidence: 0.824701636363636

00:17:19.144 --> 00:17:21.058 we're not setting it too high,

NOTE Confidence: 0.824701636363636

 $00:17:21.060 \longrightarrow 00:17:22.545$ because it will be uncomfortable

NOTE Confidence: 0.824701636363636

 $00:17:22.545 \longrightarrow 00:17:24.030$ for the patient making it

NOTE Confidence: 0.883894591875

 $00:17:24.089 \longrightarrow 00:17:25.679$ harder for them to breathe out.

00:17:25.680 --> 00:17:28.207 But also, as we increase the iPad,

NOTE Confidence: 0.883894591875

00:17:28.210 --> 00:17:30.295 just creating unnecessary

NOTE Confidence: 0.883894591875

 $00:17:30.295 \longrightarrow 00:17:33.075$ leak for the patient.

NOTE Confidence: 0.883894591875

 $00:17:33.080 \longrightarrow 00:17:36.256$ I think we also have to think about.

NOTE Confidence: 0.883894591875

 $00:17:36.260 \longrightarrow 00:17:39.500$ Groups where maybe a bit obstruction

NOTE Confidence: 0.883894591875

 $00{:}17{:}39.500 \dashrightarrow 00{:}17{:}42.170$ doesn't immediately come to mind,

NOTE Confidence: 0.883894591875

 $00:17:42.170 \longrightarrow 00:17:44.662$ and certainly patients with

NOTE Confidence: 0.883894591875

00:17:44.662 --> 00:17:47.777 a LS motor neurone disease.

NOTE Confidence: 0.883894591875

 $00:17:47.780 \longrightarrow 00:17:50.069$ How can also often have a very

NOTE Confidence: 0.883894591875

 $00{:}17{:}50.069 {\:\dashrightarrow\:} 00{:}17{:}51.919$ tricky upper airway even though

NOTE Confidence: 0.883894591875

00:17:51.919 --> 00:17:53.924 they've gotta love Chris Pucci,

NOTE Confidence: 0.883894591875

 $00{:}17{:}53.930 \dashrightarrow 00{:}17{:}57.892$ muscle weakness and George is this French

NOTE Confidence: 0.883894591875

00:17:57.892 --> 00:18:01.778 group headed up by George is Dad 179.

NOTE Confidence: 0.883894591875

00:18:01.778 --> 00:18:04.316 A list patients and thereby

NOTE Confidence: 0.883894591875

 $00:18:04.316 \longrightarrow 00:18:06.660$ using very simple oxygen.

 $00:18:06.660 \longrightarrow 00:18:08.620$ Saturation monitoring and looking at

NOTE Confidence: 0.883894591875

 $00{:}18{:}08.620 \dashrightarrow 00{:}18{:}11.510$ the pattern of that as well as leak.

NOTE Confidence: 0.883894591875

 $00:18:11.510 \longrightarrow 00:18:14.672$ They identify patients group that is

NOTE Confidence: 0.883894591875

 $00:18:14.672 \longrightarrow 00:18:16.780$ either having adequate ventilation

NOTE Confidence: 0.883894591875

 $00:18:16.856 \longrightarrow 00:18:18.724$ or being inadequately ventilated

NOTE Confidence: 0.883894591875

00:18:18.724 --> 00:18:21.980 and this is a very experienced group

NOTE Confidence: 0.883894591875

 $00:18:21.980 \longrightarrow 00:18:24.140$ of clinicians and researchers in

NOTE Confidence: 0.883894591875

 $00:18:24.140 \longrightarrow 00:18:26.300$ this impatience with Payless and

NOTE Confidence: 0.883894591875

 $00:18:26.370 \longrightarrow 00:18:28.603$ they found that when they set the

NOTE Confidence: 0.883894591875

00:18:28.603 --> 00:18:30.958 patient up and they looked at them,

NOTE Confidence: 0.883894591875

 $00{:}18{:}30.960 \dashrightarrow 00{:}18{:}32.910$ you know within a month only.

NOTE Confidence: 0.742806014666667

 $00:18:35.180 \longrightarrow 00:18:37.514$ 41% of them were inadequately ventilated

NOTE Confidence: 0.742806014666667

 $00:18:37.514 \longrightarrow 00:18:40.284$ and this was primarily due to upper

NOTE Confidence: 0.742806014666667

00:18:40.284 --> 00:18:42.079 airway obstruction and the important

NOTE Confidence: 0.742806014666667

00:18:42.079 --> 00:18:44.834 thing about you know this study and what

NOTE Confidence: 0.742806014666667

 $00:18:44.834 \longrightarrow 00:18:47.536$ it teaches us is that in this particular

00:18:47.536 --> 00:18:50.128 population if we fail to correctly

NOTE Confidence: 0.742806014666667

 $00:18:50.128 \longrightarrow 00:18:52.651$ obstruction it had quite a significant

NOTE Confidence: 0.742806014666667

 $00{:}18{:}52.651 \dashrightarrow 00{:}18{:}54.676$ effect on these patients survival.

NOTE Confidence: 0.742806014666667

 $00:18:54.680 \longrightarrow 00:18:56.960$ So those patients that were

NOTE Confidence: 0.742806014666667

 $00:18:56.960 \longrightarrow 00:18:58.328$ inadequately ventilated because

NOTE Confidence: 0.742806014666667

 $00:18:58.328 \longrightarrow 00:19:00.590$ of upper airway obstruction.

NOTE Confidence: 0.742806014666667

00:19:00.590 --> 00:19:02.300 If they couldn't get that up

NOTE Confidence: 0.742806014666667

 $00{:}19{:}02.300 \dashrightarrow 00{:}19{:}03.988$ in obstruction under control.

NOTE Confidence: 0.742806014666667

00:19:03.988 --> 00:19:06.784 Survival was very poor over the

NOTE Confidence: 0.742806014666667

00:19:06.784 --> 00:19:08.968 next 12 months and simply even

NOTE Confidence: 0.742806014666667

 $00{:}19{:}08.968 \dashrightarrow 00{:}19{:}10.598$ those patients will help anyway,

NOTE Confidence: 0.742806014666667

 $00:19:10.600 \longrightarrow 00:19:12.404$ obstruction but really weren't

NOTE Confidence: 0.742806014666667

 $00{:}19{:}12.404 \dashrightarrow 00{:}19{:}15.110$ desaturating look great deal also had

NOTE Confidence: 0.742806014666667

 $00:19:15.186 \longrightarrow 00:19:17.341$ very poor survival outcomes compared

NOTE Confidence: 0.742806014666667

00:19:17.341 --> 00:19:19.951 to those individuals who may have

00:19:19.951 --> 00:19:22.225 initially had up in late Struction,

NOTE Confidence: 0.742806014666667

 $00:19:22.230 \longrightarrow 00:19:24.330$ but they were able to correct it,

NOTE Confidence: 0.742806014666667

 $00:19:24.330 \longrightarrow 00:19:27.270$ which was in 58% of cases

NOTE Confidence: 0.742806014666667

 $00:19:27.270 \longrightarrow 00:19:28.740$ by adjusting ventilator.

NOTE Confidence: 0.742806014666667

 $00:19:28.740 \longrightarrow 00:19:30.960$ Their survival was far superior

NOTE Confidence: 0.742806014666667

 $00:19:30.960 \longrightarrow 00:19:34.490$ over that 12 month period.

NOTE Confidence: 0.742806014666667

 $00:19:34.490 \longrightarrow 00:19:35.862$ So when they're thinking

NOTE Confidence: 0.742806014666667

00:19:35.862 --> 00:19:37.234 about getting into patients,

NOTE Confidence: 0.742806014666667

 $00:19:37.240 \longrightarrow 00:19:38.902$ we really have to think about

NOTE Confidence: 0.742806014666667

 $00:19:38.902 \longrightarrow 00:19:40.800$ the masks that we're using and

NOTE Confidence: 0.742806014666667

 $00:19:40.800 \longrightarrow 00:19:43.050$ certainly looking at the literature,

NOTE Confidence: 0.742806014666667

 $00:19:43.050 \longrightarrow 00:19:46.487$ there has been news over the last.

NOTE Confidence: 0.742806014666667

 $00{:}19{:}46.490 \dashrightarrow 00{:}19{:}48.865$ Two decades from nasal masks

NOTE Confidence: 0.742806014666667

 $00:19:48.865 \longrightarrow 00:19:50.290$ to oronasal masks,

NOTE Confidence: 0.742806014666667

00:19:50.290 --> 00:19:51.550 and certainly in our practice,

NOTE Confidence: 0.742806014666667

 $00:19:51.550 \longrightarrow 00:19:54.224$ we use a lot of oronasal masks,

00:19:54.230 --> 00:19:56.756 probably about 90% of our patients

NOTE Confidence: 0.742806014666667

00:19:56.756 --> 00:19:58.900 having our own nasal mask.

NOTE Confidence: 0.742806014666667

00:19:58.900 --> 00:20:01.540 The literature in general is talking

NOTE Confidence: 0.742806014666667

00:20:01.540 --> 00:20:05.650 about 75% leased the European literature,

NOTE Confidence: 0.742806014666667

 $00{:}20{:}05.650 \dashrightarrow 00{:}20{:}07.900$ and we've got two very recent

NOTE Confidence: 0.742806014666667

00:20:07.900 --> 00:20:09.992 our cities showing that probably

NOTE Confidence: 0.742806014666667

 $00:20:09.992 \longrightarrow 00:20:12.572$ nasal oronasal masks are equally

NOTE Confidence: 0.742806014666667

 $00{:}20{:}12.572 \dashrightarrow 00{:}20{:}15.130$ effective in patients with both

NOTE Confidence: 0.742806014666667

 $00{:}20{:}15.130 \dashrightarrow 00{:}20{:}16.660$ neuromuscular conditions and.

NOTE Confidence: 0.742806014666667

00:20:16.660 --> 00:20:18.815 CRPD with respect to things

NOTE Confidence: 0.742806014666667

 $00:20:18.815 \longrightarrow 00:20:20.970$ like gas exchange and sleep,

NOTE Confidence: 0.742806014666667

 $00:20:20.970 \longrightarrow 00:20:22.240$ but it is very important.

NOTE Confidence: 0.742806014666667

 $00{:}20{:}22.240 \dashrightarrow 00{:}20{:}24.598$ This can be quite considerable variation

NOTE Confidence: 0.742806014666667

 $00:20:24.598 \longrightarrow 00:20:26.834$ with some patients doing much better

NOTE Confidence: 0.742806014666667

00:20:26.834 --> 00:20:29.210 on the Mason mask and some doing much

00:20:29.270 --> 00:20:31.644 better with hate and orientation.

NOTE Confidence: 0.742806014666667

00:20:31.644 --> 00:20:36.390 Ask in this study out of Germany are

NOTE Confidence: 0.742806014666667

00:20:36.390 --> 00:20:39.621 pretty Young's group showing that in

NOTE Confidence: 0.742806014666667

 $00:20:39.621 \longrightarrow 00:20:43.222$ patients with non invasive ventilation there,

NOTE Confidence: 0.742806014666667

00:20:43.222 --> 00:20:45.148 particularly patients with

NOTE Confidence: 0.742806014666667

 $00{:}20{:}45.148 \dashrightarrow 00{:}20{:}47.074$ neuromuscular conditions treatment.

NOTE Confidence: 0.742806014666667

 $00:20:47.080 \longrightarrow 00:20:49.204$ Associated with destruction occurred

NOTE Confidence: 0.742806014666667

 $00:20:49.204 \longrightarrow 00:20:52.390$ in about one in five individuals,

NOTE Confidence: 0.742806014666667

 $00:20:52.390 \longrightarrow 00:20:55.576$ but mainly in patients with neuromuscular

NOTE Confidence: 0.742806014666667

 $00:20:55.576 \longrightarrow 00:20:58.566$ conditions as opposed to other

NOTE Confidence: 0.742806014666667

 $00{:}20{:}58.566 \rightarrow 00{:}21{:}00.918$ sleep hypoventilation conditions.

NOTE Confidence: 0.742806014666667

 $00:21:00.920 \longrightarrow 00:21:03.760$ And it wasn't there had a reasonable number

NOTE Confidence: 0.742806014666667

00:21:03.760 --> 00:21:06.580 of Payless patients in amongst this group,

NOTE Confidence: 0.742806014666667

 $00:21:06.580 \longrightarrow 00:21:09.849$ and the presence or absence of severe

NOTE Confidence: 0.742806014666667

00:21:09.849 --> 00:21:12.286 bulbar dysfunction didn't seem to

NOTE Confidence: 0.742806014666667

 $00:21:12.286 \longrightarrow 00:21:14.691$ influence whether or not patients

 $00:21:14.691 \longrightarrow 00:21:17.180$ would develop copyright substruction.

NOTE Confidence: 0.742806014666667

 $00:21:17.180 \longrightarrow 00:21:18.610$ Everything alright.

NOTE Confidence: 0.742806014666667 00:21:18.610 --> 00:21:20.040 Nasal mask.

NOTE Confidence: 0.742806014666667

 $00:21:20.040 \longrightarrow 00:21:22.641$ So we just have to remember if we are

NOTE Confidence: 0.742806014666667

 $00:21:22.641 \longrightarrow 00:21:24.978$ using these masks or removing someone

NOTE Confidence: 0.742806014666667

 $00:21:24.978 \longrightarrow 00:21:27.715$ from an Asian last oronasal that we

NOTE Confidence: 0.742806014666667

 $00:21:27.715 \longrightarrow 00:21:30.109$ can give up a distraction from that

NOTE Confidence: 0.742806014666667

 $00{:}21{:}30.109 \dashrightarrow 00{:}21{:}32.994$ jewelry traction from that or a nasal mask,

NOTE Confidence: 0.742806014666667

 $00{:}21{:}33.000 \dashrightarrow 00{:}21{:}34.885$ particularly in patients who have

NOTE Confidence: 0.742806014666667

 $00:21:34.885 \longrightarrow 00:21:36.770$ weakness of hypertonia of the

NOTE Confidence: 0.742806014666667

 $00:21:36.832 \longrightarrow 00:21:38.984$ tongues so we can see that it's in

NOTE Confidence: 0.742806014666667

 $00:21:38.984 \longrightarrow 00:21:41.582$ that quite a bit in patients with

NOTE Confidence: 0.742806014666667

 $00{:}21{:}41.582 \to 00{:}21{:}43.178$ Princeton station muscular dystrophy,

NOTE Confidence: 0.742806014666667

 $00:21:43.180 \longrightarrow 00:21:44.700$ and in particular if they're

NOTE Confidence: 0.742806014666667

 $00:21:44.700 \longrightarrow 00:21:45.916$ in a supine position.

 $00:21:45.920 \longrightarrow 00:21:48.224$ And REM when the tongue is floppy and you

NOTE Confidence: 0.742806014666667

 $00:21:48.224 \longrightarrow 00:21:50.770$ can have high pressures during inspiration.

NOTE Confidence: 0.742806014666667

 $00:21:50.770 \longrightarrow 00:21:53.662$ Causing that blockage of the upper

NOTE Confidence: 0.742806014666667

 $00:21:53.662 \longrightarrow 00:21:56.200$ airway with that flop tongue

NOTE Confidence: 0.742806014666667

 $00:21:56.200 \longrightarrow 00:21:58.216$ said something to bear in mind.

NOTE Confidence: 0.742806014666667

 $00{:}21{:}58.220 \dashrightarrow 00{:}22{:}00.956$ So let's think about then putting

NOTE Confidence: 0.742806014666667

 $00:22:00.956 \longrightarrow 00:22:04.489$ the in's and outs on more automatic.

NOTE Confidence: 0.742806014666667

 $00:22:04.490 \longrightarrow 00:22:07.350$ Where does auto titrating

NOTE Confidence: 0.742806014666667

00:22:07.350 --> 00:22:09.495 bilevel devices sit?

NOTE Confidence: 0.742806014666667

 $00:22:09.500 \longrightarrow 00:22:11.110$ Well when we think about

NOTE Confidence: 0.742806014666667

 $00:22:11.110 \longrightarrow 00:22:12.720$ volume tag or the pressure

NOTE Confidence: 0.805763464

00:22:12.786 --> 00:22:15.018 support it's a great idea in

NOTE Confidence: 0.805763464

00:22:15.018 --> 00:22:16.506 theory because hopefully these

NOTE Confidence: 0.805763464

 $00:22:16.577 \longrightarrow 00:22:18.692$ devices will adjust the pressure

NOTE Confidence: 0.805763464

00:22:18.692 --> 00:22:20.807 support so we're maintaining that.

NOTE Confidence: 0.805763464

 $00:22:20.810 \longrightarrow 00:22:22.625$ Target tidal volume irrespective of

 $00:22:22.625 \longrightarrow 00:22:25.071$ what the patient is doing in terms

NOTE Confidence: 0.805763464

00:22:25.071 --> 00:22:28.090 of sleep stage, sleep position,

NOTE Confidence: 0.805763464

 $00:22:28.090 \longrightarrow 00:22:30.170$ overtime as the patient gains,

NOTE Confidence: 0.805763464

 $00:22:30.170 \longrightarrow 00:22:33.440$ loses weight or disease progression

NOTE Confidence: 0.805763464

 $00:22:33.440 \longrightarrow 00:22:35.894$ and we have the power increasing

NOTE Confidence: 0.805763464

 $00:22:35.894 \longrightarrow 00:22:38.398$ numbers of people coming out showing

NOTE Confidence: 0.805763464

00:22:38.398 --> 00:22:41.498 it is effective in patients with COPD,

NOTE Confidence: 0.805763464

00:22:41.498 --> 00:22:42.954 obesity, hyperventilation,

NOTE Confidence: 0.805763464

 $00:22:42.954 \longrightarrow 00:22:45.138$ and neuromuscular conditions.

NOTE Confidence: 0.805763464

00:22:45.140 --> 00:22:47.168 But it is important to state

NOTE Confidence: 0.805763464

 $00:22:47.168 \longrightarrow 00:22:48.958$ that there's no evidence that

NOTE Confidence: 0.805763464

 $00:22:48.958 \longrightarrow 00:22:50.818$ these this device is actually.

NOTE Confidence: 0.805763464

 $00{:}22{:}50.820 \dashrightarrow 00{:}22{:}52.720$ Giving us superior outcomes,

NOTE Confidence: 0.805763464

00:22:52.720 --> 00:22:55.570 but I think it's actually really

NOTE Confidence: 0.805763464

 $00:22:55.656 \longrightarrow 00:22:58.368$ useful option we starting to titrate

 $00:22:58.368 \longrightarrow 00:23:01.227$ or trying to optimize our patients and

NOTE Confidence: 0.805763464

00:23:01.227 --> 00:23:03.908 we do use it not on every patient.

NOTE Confidence: 0.805763464

 $00:23:03.908 \longrightarrow 00:23:06.660$ I do generally still use fixed pressure,

NOTE Confidence: 0.805763464

 $00:23:06.660 \longrightarrow 00:23:09.468$ but it's a really nice mode and an option

NOTE Confidence: 0.805763464

 $00:23:09.468 \longrightarrow 00:23:12.125$ to have or a number of individuals,

NOTE Confidence: 0.805763464

00:23:12.130 --> 00:23:15.084 and in particular we've found patients who

NOTE Confidence: 0.805763464

 $00:23:15.084 \longrightarrow 00:23:17.738$ require quite high pressures at night.

NOTE Confidence: 0.805763464

00:23:17.740 --> 00:23:21.170 Maybe for instance in can REM sleep.

NOTE Confidence: 0.805763464

 $00{:}23{:}21.170 --> 00{:}23{:}22.825$ But they can't rate those

NOTE Confidence: 0.805763464

00:23:22.825 --> 00:23:23.818 pressures during wakefulness,

NOTE Confidence: 0.805763464

 $00:23:23.820 \longrightarrow 00:23:26.431$ and it can really help improve that

NOTE Confidence: 0.805763464

00:23:26.431 --> 00:23:28.329 comfort and acceptance of therapy.

NOTE Confidence: 0.805763464

 $00{:}23{:}28.330 \to 00{:}23{:}29.965$ And also patients where we've

NOTE Confidence: 0.805763464

 $00{:}23{:}29.965 \dashrightarrow 00{:}23{:}32.330$ got quite a bit done titration.

NOTE Confidence: 0.805763464

 $00:23:32.330 \longrightarrow 00:23:34.738$ And there's quite a lot of difference in

NOTE Confidence: 0.805763464

 $00:23:34.738 \longrightarrow 00:23:36.509$ pressure support between sleep stages.

00:23:36.510 --> 00:23:37.848 Then, I think,

NOTE Confidence: 0.805763464

 $00{:}23{:}37.848 \dashrightarrow 00{:}23{:}40.078$ often only target pressure support

NOTE Confidence: 0.805763464

 $00:23:40.078 \longrightarrow 00:23:43.368$ is a low grade those individuals,

NOTE Confidence: 0.805763464

 $00:23:43.370 \longrightarrow 00:23:47.720$ but it isn't what these are not affected.

NOTE Confidence: 0.805763464

 $00:23:47.720 \longrightarrow 00:23:50.464$ Set and forget to type out black box.

NOTE Confidence: 0.805763464

 $00:23:50.470 \longrightarrow 00:23:51.898$ It's really important, Lee.

NOTE Confidence: 0.805763464

 $00:23:51.898 \longrightarrow 00:23:52.969$ How will they?

NOTE Confidence: 0.805763464

00:23:52.970 --> 00:23:55.256 This mode of therapy works depends

NOTE Confidence: 0.805763464

 $00:23:55.256 \longrightarrow 00:23:57.560$ on the targets that we've set.

NOTE Confidence: 0.805763464

 $00:23:57.560 \longrightarrow 00:23:59.920$ Understanding the limits of these

NOTE Confidence: 0.805763464

00:23:59.920 --> 00:24:02.088 devices and ensuring that we're

NOTE Confidence: 0.805763464

 $00:24:02.088 \longrightarrow 00:24:03.958$ monitoring these individuals to make

NOTE Confidence: 0.805763464

 $00:24:03.958 \longrightarrow 00:24:06.553$ sure the device is delivering what we

NOTE Confidence: 0.805763464

00:24:06.553 --> 00:24:08.659 think it supposed to vegetable drink,

NOTE Confidence: 0.805763464

00:24:08.660 --> 00:24:12.384 and the two major problems with these

00:24:12.384 --> 00:24:16.650 devices is first of all the auto titrating.

NOTE Confidence: 0.805763464

 $00:24:16.650 \longrightarrow 00:24:19.776$ The rapies is that the impact that

NOTE Confidence: 0.805763464

00:24:19.776 --> 00:24:22.560 unintentional leak can have on

NOTE Confidence: 0.805763464

 $00:24:22.560 \longrightarrow 00:24:25.020$ the effectiveness of ventilation?

NOTE Confidence: 0.805763464

 $00:24:25.020 \longrightarrow 00:24:27.812$ So you'll often see when you have these

NOTE Confidence: 0.805763464

00:24:27.812 --> 00:24:30.289 patients on non invasive ventilation.

NOTE Confidence: 0.805763464

 $00:24:30.290 \longrightarrow 00:24:31.991$ If there's a leak in the system

NOTE Confidence: 0.805763464

 $00:24:31.991 \longrightarrow 00:24:33.040$ the machine was with,

NOTE Confidence: 0.805763464

 $00{:}24{:}33.040 --> 00{:}24{:}35.032$ a single line will start to

NOTE Confidence: 0.805763464

 $00:24:35.032 \longrightarrow 00:24:36.960$ read much higher tidal volumes.

NOTE Confidence: 0.805763464

 $00{:}24{:}36.960 {\:{\mbox{--}}}{\:{\mbox{-}}} 00{:}24{:}38.906$ So if you've got a volume target

NOTE Confidence: 0.805763464

 $00:24:38.906 \longrightarrow 00:24:40.062$ pressure support and there's

NOTE Confidence: 0.805763464

 $00:24:40.062 \longrightarrow 00:24:41.634$ a large leak in the system,

NOTE Confidence: 0.805763464

 $00{:}24{:}41.640 \dashrightarrow 00{:}24{:}44.153$ the machine will often think that the

NOTE Confidence: 0.805763464

 $00:24:44.153 \longrightarrow 00:24:46.638$ patient is getting too large and breath.

NOTE Confidence: 0.805763464

 $00:24:46.640 \longrightarrow 00:24:48.999$ It will see that high tide environment

 $00:24:48.999 \longrightarrow 00:24:51.937$ and start to reduce the pressure support.

NOTE Confidence: 0.805763464

 $00:24:51.940 \longrightarrow 00:24:55.144$ So affectively will begin to under

NOTE Confidence: 0.805763464

00:24:55.144 --> 00:24:57.880 ventilate the individual and Nugent

NOTE Confidence: 0.805763464

 $00:24:57.880 \longrightarrow 00:25:00.463$ and has done and so Joe had done a

NOTE Confidence: 0.805763464

 $00{:}25{:}00.463 \dashrightarrow 00{:}25{:}02.993$ number of studies looking at that

NOTE Confidence: 0.805763464

00:25:02.993 --> 00:25:05.163 particular moment in patients using

NOTE Confidence: 0.805763464

00:25:05.237 --> 00:25:07.317 volume target pressure support

NOTE Confidence: 0.805763464

 $00:25:07.317 \longrightarrow 00:25:08.877$ modes of ventilation.

NOTE Confidence: 0.805763464

 $00:25:08.880 \longrightarrow 00:25:11.104$ The other thing we have to be really

NOTE Confidence: 0.805763464

 $00:25:11.104 \longrightarrow 00:25:13.416$ careful of is the prisons of airway

NOTE Confidence: 0.805763464

00:25:13.416 --> 00:25:15.386 obstruction that's not being properly

NOTE Confidence: 0.805763464

 $00{:}25{:}15.386 \rightarrow 00{:}25{:}17.370$ treated because this will lead to.

NOTE Confidence: 0.805763464

 $00{:}25{:}17.370 \dashrightarrow 00{:}25{:}19.800$ In effective ventilation as you can

NOTE Confidence: 0.805763464

 $00:25:19.800 \longrightarrow 00:25:23.465$ see in this picture here you can see

NOTE Confidence: 0.805763464

 $00:25:23.465 \longrightarrow 00:25:26.009$ the variation in the pressure the

00:25:26.009 --> 00:25:28.324 patient has upper airway obstruction,

NOTE Confidence: 0.805763464

 $00:25:28.330 \longrightarrow 00:25:30.730$ the machine and as a result of that

NOTE Confidence: 0.805763464

 $00:25:30.730 \longrightarrow 00:25:32.810$ there's a drop in tidal volume.

NOTE Confidence: 0.805763464

 $00:25:32.810 \longrightarrow 00:25:34.958$ Machine tries to ramp the pressure

NOTE Confidence: 0.805763464

 $00:25:34.958 \longrightarrow 00:25:36.390$ up the patient because

NOTE Confidence: 0.874987417647059

 $00:25:36.456 \longrightarrow 00:25:38.528$ at the end of the extraction then

NOTE Confidence: 0.874987417647059

 $00:25:38.530 \longrightarrow 00:25:41.068$ arouses takes a few deep breaths.

NOTE Confidence: 0.874987417647059

00:25:41.070 --> 00:25:43.422 They now over ventilated so boring

NOTE Confidence: 0.874987417647059

 $00{:}25{:}43.422 \dashrightarrow 00{:}25{:}45.889$ machine takes the pressure support down.

NOTE Confidence: 0.874987417647059

 $00:25:45.890 \longrightarrow 00:25:47.717$ The patient goes back off to sleep.

NOTE Confidence: 0.874987417647059

 $00:25:47.720 \longrightarrow 00:25:49.622$ The obstruction occurs again and then

NOTE Confidence: 0.874987417647059

 $00:25:49.622 \longrightarrow 00:25:52.315$ we can get the entire period time

NOTE Confidence: 0.874987417647059

 $00:25:52.315 \longrightarrow 00:25:54.127$ with this repetitive obstruction.

NOTE Confidence: 0.874987417647059

 $00:25:54.130 \longrightarrow 00:25:57.368$ Variations and tidal volume and minute

NOTE Confidence: 0.874987417647059

 $00:25:57.368 \longrightarrow 00:25:59.800$ ventilation and potentially quite

NOTE Confidence: 0.874987417647059

 $00{:}25{:}59.800 \dashrightarrow 00{:}26{:}03.512$ high tidal volumes with not lead

 $00:26:03.512 \longrightarrow 00:26:06.056$ into effective dentistry support.

NOTE Confidence: 0.874987417647059

 $00:26:06.060 \longrightarrow 00:26:08.685$ And so we know that persisting at

NOTE Confidence: 0.874987417647059

 $00:26:08.685 \longrightarrow 00:26:10.820$ the airway obstruction can impact

NOTE Confidence: 0.874987417647059

00:26:10.820 --> 00:26:12.846 both ventilation, gas exchange,

NOTE Confidence: 0.874987417647059

 $00:26:12.846 \longrightarrow 00:26:13.932$ sleep quality,

NOTE Confidence: 0.874987417647059

 $00:26:13.932 \longrightarrow 00:26:17.190$ and in some patients even survival.

NOTE Confidence: 0.874987417647059

00:26:17.190 --> 00:26:18.960 But for many of these individuals,

NOTE Confidence: 0.874987417647059

 $00:26:18.960 \longrightarrow 00:26:22.248$ that high pets not required continuously,

NOTE Confidence: 0.874987417647059

 $00:26:22.250 \longrightarrow 00:26:25.016$ so the availability of the auto

NOTE Confidence: 0.874987417647059

00:26:25.016 --> 00:26:28.180 epac modes can be quite useful.

NOTE Confidence: 0.874987417647059

00:26:28.180 --> 00:26:30.679 You know this may present in some

NOTE Confidence: 0.874987417647059

00:26:30.679 --> 00:26:33.606 machines as auto AE or auto epap,

NOTE Confidence: 0.874987417647059

 $00{:}26{:}33.606 \dashrightarrow 00{:}26{:}36.390$ or it could be automated airway.

NOTE Confidence: 0.874987417647059

 $00:26:36.390 \longrightarrow 00:26:38.718$ Management in other devices and the

NOTE Confidence: 0.874987417647059

 $00:26:38.718 \longrightarrow 00:26:42.204$ idea of this has been under set that

 $00:26:42.204 \longrightarrow 00:26:44.524$ minimum and maximum impact pressure.

NOTE Confidence: 0.874987417647059

 $00{:}26{:}44.530 \dashrightarrow 00{:}26{:}46.931$ So the machine now has the capability

NOTE Confidence: 0.874987417647059

00:26:46.931 --> 00:26:49.503 of not only increasing and hopefully

NOTE Confidence: 0.874987417647059

 $00:26:49.503 \longrightarrow 00:26:51.953$ very impressed support in response

NOTE Confidence: 0.874987417647059

00:26:51.953 --> 00:26:54.799 to hypoxia or low tidal volume

NOTE Confidence: 0.874987417647059

 $00:26:54.799 \longrightarrow 00:26:56.591$ associated with non obstructive

NOTE Confidence: 0.874987417647059

 $00:26:56.591 \longrightarrow 00:26:59.458$ had partners but also increasing

NOTE Confidence: 0.874987417647059

00:26:59.458 --> 00:27:03.466 EPAC to manage that hypoxemia or

NOTE Confidence: 0.874987417647059

 $00:27:03.466 \longrightarrow 00:27:07.096$ obstruction caused by airway closure.

NOTE Confidence: 0.874987417647059

00:27:07.100 --> 00:27:08.024 But of course,

NOTE Confidence: 0.874987417647059

 $00{:}27{:}08.024 \dashrightarrow 00{:}27{:}09.872$ we're not relying on these devices

NOTE Confidence: 0.874987417647059

 $00:27:09.872 \longrightarrow 00:27:11.897$ and the algorithms within them to

NOTE Confidence: 0.874987417647059

 $00:27:11.897 \longrightarrow 00:27:14.035$ be good enough to recognize mental

NOTE Confidence: 0.874987417647059

00:27:14.035 --> 00:27:16.120 power increase pressures at quarter,

NOTE Confidence: 0.874987417647059

 $00:27:16.120 \longrightarrow 00:27:18.286$ and went increasingly pack in response

NOTE Confidence: 0.874987417647059

00:27:18.286 --> 00:27:20.649 to that drop and tidal volume,

 $00:27:20.650 \longrightarrow 00:27:23.350$ whether it's related to obstruction

NOTE Confidence: 0.874987417647059

 $00:27:23.350 \longrightarrow 00:27:24.970$ or non obstruction.

NOTE Confidence: 0.874987417647059

 $00:27:24.970 \longrightarrow 00:27:26.810$ And we have two papers,

NOTE Confidence: 0.874987417647059

00:27:26.810 --> 00:27:30.874 one out of five WA with Nigel regardless

NOTE Confidence: 0.874987417647059

 $00:27:30.874 \longrightarrow 00:27:34.438$ group and also here in the states.

NOTE Confidence: 0.874987417647059

 $00:27:34.440 \longrightarrow 00:27:38.899$ Looking at the use of auto ipat

NOTE Confidence: 0.874987417647059

 $00:27:38.900 \longrightarrow 00:27:40.692$ during PSG guided titrations.

NOTE Confidence: 0.874987417647059

 $00:27:40.692 \longrightarrow 00:27:43.380$ And both of these studies used

NOTE Confidence: 0.874987417647059

 $00:27:43.460 \longrightarrow 00:27:45.910$ patients who were already used

NOTE Confidence: 0.874987417647059

 $00:27:45.910 \longrightarrow 00:27:47.870$ to non invasive ventilation,

NOTE Confidence: 0.874987417647059

 $00:27:47.870 \longrightarrow 00:27:50.462$ so these were not naive to to the rapy

NOTE Confidence: 0.874987417647059

 $00:27:50.462 \longrightarrow 00:27:53.230$ and what both of these studies showed.

NOTE Confidence: 0.874987417647059

 $00{:}27{:}53.230 \dashrightarrow 00{:}27{:}55.498$ Whether you're looking at a hi.

NOTE Confidence: 0.874987417647059

 $00:27:55.500 \longrightarrow 00:27:58.860$ Looking at ody that the use of these

NOTE Confidence: 0.874987417647059

 $00:27:58.860 \longrightarrow 00:28:02.360$ auto ipet modes of people that support

00:28:02.360 --> 00:28:05.748 we're not in power inferior to PS

NOTE Confidence: 0.874987417647059

 $00{:}28{:}05.748 \dashrightarrow 00{:}28{:}07.869$ she carded using fixed pressure,

NOTE Confidence: 0.874987417647059

 $00:28:07.869 \longrightarrow 00:28:11.110$ but particularly look at the Mikado paper.

NOTE Confidence: 0.874987417647059

 $00:28:11.110 \longrightarrow 00:28:14.074$ You can see there's quite variable

NOTE Confidence: 0.874987417647059

 $00:28:14.074 \longrightarrow 00:28:16.878$ individual response to whether another

NOTE Confidence: 0.874987417647059

 $00:28:16.878 \longrightarrow 00:28:20.736$ patient responds better to the auto E

NOTE Confidence: 0.874987417647059

 $00:28:20.736 \longrightarrow 00:28:23.970$ pack or two A2 affixed to a fixed pressure,

NOTE Confidence: 0.874987417647059

00:28:23.970 --> 00:28:26.504 and unfortunately in their paper they wasn't.

NOTE Confidence: 0.874987417647059

 $00:28:26.510 \longrightarrow 00:28:28.745$ Large enough numbers under different

NOTE Confidence: 0.874987417647059

00:28:28.745 --> 00:28:30.980 diagnostic groups to work out

NOTE Confidence: 0.874987417647059

 $00{:}28{:}31.051 \dashrightarrow 00{:}28{:}32.981$ any pattern of which patients

NOTE Confidence: 0.874987417647059

 $00:28:32.981 \longrightarrow 00:28:35.340$ might respond better to the fixed

NOTE Confidence: 0.874987417647059

 $00:28:35.340 \longrightarrow 00:28:37.488$ versus an auto titrating a pet.

NOTE Confidence: 0.874987417647059

 $00:28:37.490 \longrightarrow 00:28:40.382$ And we also don't have longer

NOTE Confidence: 0.874987417647059

 $00:28:40.382 \longrightarrow 00:28:43.094$ term information about how these

NOTE Confidence: 0.874987417647059

 $00:28:43.094 \longrightarrow 00:28:47.168$ this mode of setting a PAP.

 $00:28:47.170 \longrightarrow 00:28:49.470$ Works in the longer term.

NOTE Confidence: 0.874987417647059

 $00:28:49.470 \longrightarrow 00:28:50.774$ Some of those additional

NOTE Confidence: 0.874987417647059

 $00:28:50.774 \longrightarrow 00:28:52.404$ settings things like rise time.

NOTE Confidence: 0.874987417647059

 $00:28:52.410 \longrightarrow 00:28:54.450$ It can be incredibly important in

NOTE Confidence: 0.874987417647059

 $00:28:54.450 \longrightarrow 00:28:56.484$ terms of patient comfort and given

NOTE Confidence: 0.874987417647059

 $00:28:56.484 \longrightarrow 00:28:58.624$ the air into patients so that you

NOTE Confidence: 0.874987417647059

 $00:28:58.624 \longrightarrow 00:29:00.780$ know the rise times how fast that

NOTE Confidence: 0.874987417647059

00:29:00.854 --> 00:29:02.804 E Peppers going Oakley pressure

NOTE Confidence: 0.874987417647059

 $00{:}29{:}02.804 \dashrightarrow 00{:}29{:}05.379$ support is going for epub to iPad.

NOTE Confidence: 0.874987417647059

00:29:05.380 --> 00:29:07.490 And depending on the device

NOTE Confidence: 0.874987417647059

 $00:29:07.490 \longrightarrow 00:29:09.178$ within numerical time scale,

NOTE Confidence: 0.874987417647059

 $00:29:09.180 \longrightarrow 00:29:10.536$ so generally speaking,

NOTE Confidence: 0.874987417647059

 $00{:}29{:}10.536 \dashrightarrow 00{:}29{:}13.300$ patients with COPD prefer that faster

NOTE Confidence: 0.874987417647059

 $00:29:13.300 \longrightarrow 00:29:15.625$ pressurisation in particular compared to.

NOTE Confidence: 0.752227771818182

 $00:29:15.630 \longrightarrow 00:29:17.597$ If you look at a patient with

 $00:29:17.597 \longrightarrow 00:29:19.200$ a new mushkilat conditions.

NOTE Confidence: 0.752227771818182

 $00:29:19.200 \longrightarrow 00:29:21.248$ So what we're trying to do with that

NOTE Confidence: 0.752227771818182

00:29:21.248 --> 00:29:23.100 rise time is matched the patient

NOTE Confidence: 0.752227771818182

 $00:29:23.100 \longrightarrow 00:29:25.563$ speaking spirit reflow so his COPD

NOTE Confidence: 0.752227771818182

 $00:29:25.563 \longrightarrow 00:29:29.211$ patients generally prefer that the

NOTE Confidence: 0.752227771818182

 $00:29:29.211 \longrightarrow 00:29:32.092$ higher the faster pressurization life.

NOTE Confidence: 0.752227771818182

 $00:29:32.092 \longrightarrow 00:29:33.260$ It is too fast.

NOTE Confidence: 0.752227771818182

 $00:29:33.260 \longrightarrow 00:29:35.384$ It can be quite uncomfortable for

NOTE Confidence: 0.752227771818182

 $00{:}29{:}35.384 \dashrightarrow 00{:}29{:}37.656$ the patient and create these very

NOTE Confidence: 0.752227771818182

 $00:29:37.656 \longrightarrow 00:29:40.400$ high and unnecessary peak flows and a

NOTE Confidence: 0.752227771818182

00:29:40.400 --> 00:29:42.214 neuromuscular patient for neuromuscular

NOTE Confidence: 0.752227771818182

00:29:42.214 --> 00:29:44.914 condition is likely to complain about.

NOTE Confidence: 0.752227771818182

 $00:29:44.920 \longrightarrow 00:29:46.510$ You know the pressure being too

NOTE Confidence: 0.752227771818182

 $00:29:46.510 \longrightarrow 00:29:48.372$ high even if the pressure is

NOTE Confidence: 0.752227771818182

 $00:29:48.372 \longrightarrow 00:29:49.848$ actually set relatively low.

NOTE Confidence: 0.752227771818182

 $00{:}29{:}49.850 \dashrightarrow 00{:}29{:}52.002$ It's a flow rate at them is just

 $00:29:52.002 \longrightarrow 00:29:53.886$ too hot and it is too high.

NOTE Confidence: 0.752227771818182

 $00{:}29{:}53.890 \dashrightarrow 00{:}29{:}55.708$ You often get this little peek

NOTE Confidence: 0.752227771818182

00:29:55.708 --> 00:29:57.610 on the on the pressure,

NOTE Confidence: 0.752227771818182

00:29:57.610 --> 00:29:59.275 just indicating that they're being

NOTE Confidence: 0.752227771818182

 $00{:}29{:}59.275 \dashrightarrow 00{:}30{:}02.288$ hit in the face a little bit too hard.

NOTE Confidence: 0.752227771818182

 $00:30:02.290 \longrightarrow 00:30:03.154$ On the other hand,

NOTE Confidence: 0.752227771818182

 $00:30:03.154 \longrightarrow 00:30:05.349$ if he said it too slow and the patient,

NOTE Confidence: 0.752227771818182

 $00:30:05.350 \longrightarrow 00:30:06.754$ particularly those with COPD,

NOTE Confidence: 0.752227771818182

00:30:06.754 --> 00:30:08.509 will fill up their suffocating,

NOTE Confidence: 0.752227771818182

 $00:30:08.510 \longrightarrow 00:30:11.978$ they just were not matching their

NOTE Confidence: 0.752227771818182

 $00{:}30{:}11.978 \dashrightarrow 00{:}30{:}14.315$ inspiratory peak inspiratory demands

NOTE Confidence: 0.752227771818182

 $00:30:14.315 \dashrightarrow 00:30:17.825$ and can be quite uncomfortable for.

NOTE Confidence: 0.752227771818182

 $00{:}30{:}17.830 \dashrightarrow 00{:}30{:}20.566$ So it's not just about comfort,

NOTE Confidence: 0.752227771818182

 $00:30:20.570 \dashrightarrow 00:30:22.908$ it can also impact on tidal volume.

NOTE Confidence: 0.752227771818182

 $00:30:22.910 \longrightarrow 00:30:25.002$ Pan in this illustration.

 $00:30:25.002 \longrightarrow 00:30:28.200$ Here it is a an exaggeration,

NOTE Confidence: 0.752227771818182

00:30:28.200 --> 00:30:31.690 but you can see that the green

NOTE Confidence: 0.752227771818182

 $00:30:31.690 \longrightarrow 00:30:34.280$ arrow in the top panel with the

NOTE Confidence: 0.752227771818182

 $00:30:34.280 \longrightarrow 00:30:36.350$ rise time with 100 mills.

NOTE Confidence: 0.752227771818182

 $00:30:36.350 \longrightarrow 00:30:38.352$ If you look at that, sorry 100 milliseconds.

NOTE Confidence: 0.752227771818182

 $00:30:38.352 \dashrightarrow 00:30:40.550$ You can see the tidal volume here.

NOTE Confidence: 0.752227771818182

 $00:30:40.550 \longrightarrow 00:30:42.968$ It's close to about 500 mills,

NOTE Confidence: 0.752227771818182

 $00:30:42.970 \longrightarrow 00:30:45.688$ keeping all the settings exactly the

NOTE Confidence: 0.752227771818182

 $00:30:45.688 \longrightarrow 00:30:48.758$ same could change the rise time to 7.

NOTE Confidence: 0.752227771818182

 $00:30:48.760 \longrightarrow 00:30:50.552$ 190 seconds you get,

NOTE Confidence: 0.752227771818182 00:30:50.552 --> 00:30:51.448 you know, NOTE Confidence: 0.752227771818182

 $00:30:51.450 \longrightarrow 00:30:54.562$ just over 100 mil drop in tidal volume

NOTE Confidence: 0.752227771818182

 $00:30:54.562 \dashrightarrow 00:30:56.716$ because there's less area under that

NOTE Confidence: 0.752227771818182

 $00:30:56.716 \longrightarrow 00:31:00.040$ that curve to to give us that title volume.

NOTE Confidence: 0.752227771818182

 $00:31:00.040 \longrightarrow 00:31:03.281$ So thinking about as we change particularly

NOTE Confidence: 0.752227771818182

00:31:03.281 --> 00:31:06.097 make large changes in the right time,

 $00:31:06.100 \longrightarrow 00:31:08.210$ help may impact on cattle.

NOTE Confidence: 0.851448454

 $00{:}31{:}10.290 \to 00{:}31{:}14.151$ Inspiratory times settings can be very

NOTE Confidence: 0.851448454

 $00:31:14.151 \longrightarrow 00:31:15.957$ important to make sure that we're

NOTE Confidence: 0.851448454

00:31:15.957 --> 00:31:17.751 matching what the machine is doing

NOTE Confidence: 0.851448454

 $00:31:17.751 \longrightarrow 00:31:19.704$ to what the patient is is required.

NOTE Confidence: 0.851448454

00:31:19.710 --> 00:31:22.335 So generally speaking in machine

NOTE Confidence: 0.851448454

 $00:31:22.335 \longrightarrow 00:31:25.896$ deluded Brits, we need to to set up a

NOTE Confidence: 0.851448454

 $00:31:25.900 \longrightarrow 00:31:29.338$ machine at A TI inspiratory to night,

NOTE Confidence: 0.851448454

 $00:31:29.340 \longrightarrow 00:31:32.133$ but there are now a number of

NOTE Confidence: 0.851448454

 $00{:}31{:}32.133 \dashrightarrow 00{:}31{:}34.400$ devices where we can also set

NOTE Confidence: 0.851448454

 $00:31:34.400 \longrightarrow 00:31:36.740$ a T and wind and less feature,

NOTE Confidence: 0.851448454

 $00:31:36.740 \longrightarrow 00:31:38.960$ and this is clearly really useful

NOTE Confidence: 0.851448454

 $00{:}31{:}38.960 \dashrightarrow 00{:}31{:}40.680$ where we're trying to match.

NOTE Confidence: 0.851448454

 $00:31:40.680 \longrightarrow 00:31:44.082$ Machine is doing to the patients neural

NOTE Confidence: 0.851448454

 $00:31:44.082 \longrightarrow 00:31:46.656$ time and so when we think about the

00:31:46.656 --> 00:31:49.572 T I'm in there trying to make sure

NOTE Confidence: 0.851448454

 $00:31:49.572 \longrightarrow 00:31:52.517$ that the when the patient triggers the

NOTE Confidence: 0.851448454

00:31:52.517 --> 00:31:55.265 breath that inspiration is going to

NOTE Confidence: 0.851448454

00:31:55.270 --> 00:31:58.350 occur for at least a minimum period of

NOTE Confidence: 0.851448454

00:31:58.350 --> 00:32:01.728 time to get that chest wall expansion,

NOTE Confidence: 0.851448454

00:32:01.730 --> 00:32:05.674 which is very useful in patients with pay

NOTE Confidence: 0.851448454

 $00:32:05.674 \longrightarrow 00:32:08.960$ with restrictive lung languages for pology.

NOTE Confidence: 0.851448454

 $00:32:08.960 \longrightarrow 00:32:10.654$ On the other hand, the T IMAX.

NOTE Confidence: 0.851448454

 $00:32:10.660 \longrightarrow 00:32:14.593$ Is it's really a limit or security to make

NOTE Confidence: 0.851448454

 $00:32:14.593 \longrightarrow 00:32:17.556$ sure that the machine will not continue

NOTE Confidence: 0.851448454

 $00:32:17.556 \longrightarrow 00:32:20.180$ on inspiration beyond what is reasonable,

NOTE Confidence: 0.851448454

 $00:32:20.180 \longrightarrow 00:32:22.405$ sensible for that particular patient.

NOTE Confidence: 0.851448454

 $00:32:22.410 \longrightarrow 00:32:24.455$ If, for whatever reason particularly

NOTE Confidence: 0.851448454

 $00:32:24.455 \longrightarrow 00:32:26.982$ are either long mechanics or lick

NOTE Confidence: 0.851448454

00:32:26.982 --> 00:32:29.077 that presets are conflict criteria,

NOTE Confidence: 0.851448454

 $00:32:29.080 \longrightarrow 00:32:32.660$ is not met by the machine having the T IMAX,

 $00:32:32.660 \longrightarrow 00:32:35.692$ is that surety to make sure that we

NOTE Confidence: 0.851448454

 $00:32:35.692 \longrightarrow 00:32:38.756$ haven't gotten inspiratory enough so in

NOTE Confidence: 0.851448454

 $00:32:38.756 \longrightarrow 00:32:41.804$ patients with chest wall lungs restriction?

NOTE Confidence: 0.851448454

 $00:32:41.810 \longrightarrow 00:32:43.550$ They just generally have a tendency.

NOTE Confidence: 0.851448454

 $00:32:43.550 \longrightarrow 00:32:47.838$ Because of that apology to cycle off early,

NOTE Confidence: 0.851448454

 $00:32:47.840 \longrightarrow 00:32:49.975$ and so we've got the TIF machine.

NOTE Confidence: 0.851448454

 $00:32:49.980 \longrightarrow 00:32:52.269$ It is often much shorter than what

NOTE Confidence: 0.851448454

00:32:52.269 --> 00:32:53.954 the patients new runtime they'd

NOTE Confidence: 0.851448454

 $00:32:53.954 \longrightarrow 00:32:56.468$ love to take a longer break in a

NOTE Confidence: 0.851448454

00:32:56.468 --> 00:32:57.808 bigger and better tidal volume,

NOTE Confidence: 0.851448454

00:32:57.810 --> 00:33:00.250 but there longer canix just won't let them.

NOTE Confidence: 0.851448454

 $00:33:00.250 \longrightarrow 00:33:02.980$ And if the machines following their

NOTE Confidence: 0.851448454

 $00{:}33{:}02.980 \dashrightarrow 00{:}33{:}04.345$ respiratory inspiratory flow,

NOTE Confidence: 0.851448454

 $00:33:04.350 \longrightarrow 00:33:06.096$ we're going to get that very

NOTE Confidence: 0.851448454

 $00:33:06.096 \longrightarrow 00:33:06.969$ short inspiratory time,

 $00:33:06.970 \longrightarrow 00:33:08.382$ which can be uncomfortable.

NOTE Confidence: 0.851448454

 $00:33:08.382 \longrightarrow 00:33:10.961$ And we're going to get title volumes

NOTE Confidence: 0.851448454

 $00:33:10.961 \longrightarrow 00:33:12.906$ that are less than desirable.

NOTE Confidence: 0.851448454

 $00:33:12.910 \longrightarrow 00:33:16.614$ So we can increase the T I'm in.

NOTE Confidence: 0.851448454

 $00:33:16.620 \longrightarrow 00:33:18.510$ In those in that particular case,

NOTE Confidence: 0.851448454

 $00{:}33{:}18.510 \dashrightarrow 00{:}33{:}21.006$ or maybe set a the cycle of less

NOTE Confidence: 0.851448454

 $00{:}33{:}21.006 \dashrightarrow 00{:}33{:}23.152$ sensitive to allow the machine to

NOTE Confidence: 0.851448454

 $00:33:23.152 \longrightarrow 00:33:25.318$ go out and terminate that cycle

NOTE Confidence: 0.851448454

 $00{:}33{:}25.393 \dashrightarrow 00{:}33{:}27.338$ at a slightly longer period.

NOTE Confidence: 0.851448454

 $00:33:27.340 \longrightarrow 00:33:29.900$ So this is an illustration here of the

NOTE Confidence: 0.851448454

 $00:33:29.900 \longrightarrow 00:33:32.436$ patient that we had in the sleep laboratory,

NOTE Confidence: 0.851448454

 $00:33:32.436 \longrightarrow 00:33:35.526$ and this is a patient who had a

NOTE Confidence: 0.851448454

 $00{:}33{:}35.526 \to 00{:}33{:}36.981$ restrictive chest wall disorder.

NOTE Confidence: 0.851448454

00:33:36.981 --> 00:33:39.793 Very short that I TE ratio is just

NOTE Confidence: 0.851448454

 $00:33:39.793 \longrightarrow 00:33:41.977$ too short by pushing out the T.

NOTE Confidence: 0.851448454

 $00:33:41.980 \longrightarrow 00:33:43.850$ I'm in getting much better.

00:33:46.030 --> 00:33:47.580 Inspiratory times and much more.

NOTE Confidence: 0.85495528

 $00:33:47.580 \longrightarrow 00:33:49.100$ Comfortable for the patient.

NOTE Confidence: 0.85495528

 $00:33:49.100 \longrightarrow 00:33:50.620$ On the other hand,

NOTE Confidence: 0.85495528

 $00:33:50.620 \longrightarrow 00:33:52.894$ we also don't want to push

NOTE Confidence: 0.85495528

 $00:33:52.894 \longrightarrow 00:33:54.410$ the minimum inspiratory time

NOTE Confidence: 0.85495528

 $00:33:54.481 \longrightarrow 00:33:56.476$ out too far for a patient in.

NOTE Confidence: 0.85495528

00:33:56.480 --> 00:33:58.594 You really wants to already breathe that,

NOTE Confidence: 0.85495528

 $00{:}33{:}58.600 \dashrightarrow 00{:}34{:}01.456$ and you can see here the patient

NOTE Confidence: 0.85495528

 $00:34:01.456 \longrightarrow 00:34:04.195$ they flow is has is decreasing,

NOTE Confidence: 0.85495528

 $00:34:04.195 \longrightarrow 00:34:07.730$ but the machine is still maintaining that

NOTE Confidence: 0.85495528

00:34:07.814 --> 00:34:10.990 inspiratory flow that dealt with the iPad,

NOTE Confidence: 0.85495528

 $00:34:10.990 \longrightarrow 00:34:12.556$ and that can be again very

NOTE Confidence: 0.85495528

 $00{:}34{:}12.556 \dashrightarrow 00{:}34{:}13.600$ uncomfortable for the patient.

NOTE Confidence: 0.85495528

 $00:34:13.600 \longrightarrow 00:34:15.490$ So you might see something like that.

NOTE Confidence: 0.85495528

 $00:34:15.490 \longrightarrow 00:34:18.354$ In the pic you set that ER minimum

 $00:34:18.354 \longrightarrow 00:34:20.538$ too long in obstructive lung disease,

NOTE Confidence: 0.85495528

 $00:34:20.538 \longrightarrow 00:34:22.740$ they often have the opposite problem.

NOTE Confidence: 0.85495528

 $00:34:22.740 \longrightarrow 00:34:25.108$ They have a tendency because of their long

NOTE Confidence: 0.85495528

00:34:25.108 --> 00:34:27.369 mechanics to have a delay in their cycling,

NOTE Confidence: 0.85495528

 $00:34:27.370 \longrightarrow 00:34:31.810$ so they have a prolonged TI compared to

NOTE Confidence: 0.85495528

 $00:34:31.810 \longrightarrow 00:34:33.850$ with the machine compared to Murali.

NOTE Confidence: 0.85495528

 $00{:}34{:}33.850 \dashrightarrow 00{:}34{:}36.290$ What they would ideally like to do so

NOTE Confidence: 0.85495528

00:34:36.290 --> 00:34:38.464 again it can be very uncomfortable

NOTE Confidence: 0.85495528

 $00:34:38.464 \longrightarrow 00:34:40.696$ and we've got this patient who

NOTE Confidence: 0.85495528

 $00:34:40.767 \longrightarrow 00:34:44.080$ is prone to hyperinflation.

NOTE Confidence: 0.85495528

 $00{:}34{:}44.080 \dashrightarrow 00{:}34{:}45.950$ Having difficulty trying to exhale

NOTE Confidence: 0.85495528

 $00:34:45.950 \longrightarrow 00:34:48.204$ out and they because they've got

NOTE Confidence: 0.85495528

 $00:34:48.204 \longrightarrow 00:34:49.789$ less time for breathing out.

NOTE Confidence: 0.85495528

 $00:34:49.790 \longrightarrow 00:34:52.368$ As you can see here in the illustration

NOTE Confidence: 0.85495528

 $00:34:52.368 \longrightarrow 00:34:54.814$ at the bottom of the page where the

NOTE Confidence: 0.85495528

 $00:34:54.814 \longrightarrow 00:34:56.656$ patient is trying to breathe out.

 $00:34:56.660 \longrightarrow 00:34:58.028$ If you look at the flow,

NOTE Confidence: 0.85495528

 $00{:}34{:}58.030 \dashrightarrow 00{:}34{:}59.980$ but the machine is getting hung

NOTE Confidence: 0.85495528

 $00:34:59.980 \longrightarrow 00:35:00.955$ up on inspiration,

NOTE Confidence: 0.85495528

 $00:35:00.960 \longrightarrow 00:35:03.250$ and that's actually then impacting

NOTE Confidence: 0.85495528

 $00{:}35{:}03.250 \dashrightarrow 00{:}35{:}06.251$ and you can see ineffective efforts

NOTE Confidence: 0.85495528

00:35:06.251 --> 00:35:08.236 occurring along with problems

NOTE Confidence: 0.85495528

 $00:35:08.236 \longrightarrow 00:35:10.496$ of that inspiratory hang up.

NOTE Confidence: 0.85495528

 $00:35:10.500 \longrightarrow 00:35:14.388$ So this is an illustration of where we.

NOTE Confidence: 0.85495528

 $00:35:14.390 \longrightarrow 00:35:17.022$ Limit the TR Max on that individual

NOTE Confidence: 0.85495528

 $00:35:17.022 \longrightarrow 00:35:19.257$ to what their normal neural

NOTE Confidence: 0.85495528

 $00{:}35{:}19.257 \dashrightarrow 00{:}35{:}20.928$ neural inspiratory time is.

NOTE Confidence: 0.85495528

 $00:35:20.928 \dashrightarrow 00:35:23.244$ We're going to get much better

NOTE Confidence: 0.85495528

 $00{:}35{:}23.244 \dashrightarrow 00{:}35{:}26.530$ patient ventilator synchronization,

NOTE Confidence: 0.85495528

 $00:35:26.530 \longrightarrow 00:35:30.148$ so let's think about in patient versus

NOTE Confidence: 0.85495528

00:35:30.148 --> 00:35:32.560 outpatient initiation of therapy,

 $00:35:32.560 \longrightarrow 00:35:34.126$ and certainly I think it was

NOTE Confidence: 0.85495528

 $00{:}35{:}34.126 \to 00{:}35{:}35.170$ only a decade ago.

NOTE Confidence: 0.85495528

 $00:35:35.170 \longrightarrow 00:35:38.758$ Is that the best clinical practices

NOTE Confidence: 0.85495528

00:35:38.758 --> 00:35:41.865 for sleep hypoventilation and

NOTE Confidence: 0.85495528

 $00:35:41.865 \longrightarrow 00:35:45.205$ the titration was published?

NOTE Confidence: 0.85495528

 $00:35:45.210 \longrightarrow 00:35:48.186$ And in that, in those guidelines,

NOTE Confidence: 0.85495528

 $00:35:48.190 \longrightarrow 00:35:51.886$ PSG was the recommended approach to

NOTE Confidence: 0.85495528

 $00:35:51.890 \longrightarrow 00:35:54.400$ titrating long base ventilation with

NOTE Confidence: 0.85495528

 $00{:}35{:}54.400 \dashrightarrow 00{:}35{:}56.910$ the authors of that publication,

NOTE Confidence: 0.85495528

 $00:35:56.910 \longrightarrow 00:35:58.975$ saying that you attended titration

NOTE Confidence: 0.85495528

 $00{:}35{:}58.975 \dashrightarrow 00{:}36{:}01.664$ with the PSG and there's definitive

NOTE Confidence: 0.85495528

 $00:36:01.664 \longrightarrow 00:36:03.844$ identification of an adequate

NOTE Confidence: 0.85495528

00:36:03.844 --> 00:36:06.024 level of ventilatory support,

NOTE Confidence: 0.85495528

 $00:36:06.030 \longrightarrow 00:36:07.878$ so that was only a decade ago,

NOTE Confidence: 0.85495528

 $00:36:07.880 \longrightarrow 00:36:10.970$ but certainly technology has really moved

NOTE Confidence: 0.85495528

 $00:36:10.970 \longrightarrow 00:36:15.464$ on in that period of time in a study.

00:36:15.464 --> 00:36:18.354 Looking at PSG versus outpatient

NOTE Confidence: 0.85495528

00:36:18.354 --> 00:36:22.140 setup with Molly basic ventilation,

NOTE Confidence: 0.85495528

00:36:22.140 --> 00:36:25.315 this group Australian group down

NOTE Confidence: 0.85495528

00:36:25.315 --> 00:36:27.892 from Victoria Leader for being

NOTE Confidence: 0.85495528

00:36:27.892 --> 00:36:30.930 Hannon looked at 60 in Ivy naive.

NOTE Confidence: 0.85495528

00:36:30.930 --> 00:36:33.594 Mark enabling made patients

NOTE Confidence: 0.85495528

 $00:36:33.594 \longrightarrow 00:36:36.258$ most of those had.

NOTE Confidence: 0.85495528

 $00{:}36{:}36.260 \dashrightarrow 00{:}36{:}40.184$ Turn off master that problem and what

NOTE Confidence: 0.85495528

 $00:36:40.184 \longrightarrow 00:36:42.508$ they did was all the patients came

NOTE Confidence: 0.85495528

 $00:36:42.508 \longrightarrow 00:36:44.990$ in and had a daytime titration and

NOTE Confidence: 0.85495528

 $00:36:44.990 \longrightarrow 00:36:47.752$ and then we send home to acclimatize

NOTE Confidence: 0.85495528

 $00{:}36{:}47.752 \dashrightarrow 00{:}36{:}50.065$ to the rapy and then came back at

NOTE Confidence: 0.85495528

 $00{:}36{:}50.065 \dashrightarrow 00{:}36{:}51.893$ roughly two or three weeks later

NOTE Confidence: 0.85495528

 $00:36:51.893 \longrightarrow 00:36:53.777$ when they at least starting to

NOTE Confidence: 0.85495528

00:36:53.777 --> 00:36:55.704 use the machine and they underwent

00:36:55.704 --> 00:36:57.860 either a sham PSG where they had

NOTE Confidence: 0.85495528

 $00:36:57.860 \longrightarrow 00:36:59.200$ all the leads could on.

NOTE Confidence: 0.85495528

 $00:36:59.200 \longrightarrow 00:37:00.675$ But when they're in there

NOTE Confidence: 0.85495528

 $00:37:00.675 \longrightarrow 00:37:01.855$ nobody touched the settings.

NOTE Confidence: 0.85495528

 $00:37:01.860 \longrightarrow 00:37:03.864$ The settings overnight where exactly the

NOTE Confidence: 0.85495528

 $00:37:03.864 \longrightarrow 00:37:06.728$ same that had been set up during the daytime.

NOTE Confidence: 0.85495528

 $00:37:06.730 \longrightarrow 00:37:09.868$ All the patients underwent some titration

NOTE Confidence: 0.85495528

00:37:09.868 --> 00:37:13.420 of settings during that particular study,

NOTE Confidence: 0.85495528

 $00{:}37{:}13.420 \dashrightarrow 00{:}37{:}15.260$ and then the patients were

NOTE Confidence: 0.85495528

 $00:37:15.260 \longrightarrow 00:37:17.100$ again reviewed with the PSG

NOTE Confidence: 0.856653341176471

 $00:37:17.170 \longrightarrow 00:37:20.166$ somewhere between six and eight weeks later,

NOTE Confidence: 0.856653341176471

 $00:37:20.170 \longrightarrow 00:37:23.978$ and what this study showed that while the

NOTE Confidence: 0.856653341176471

00:37:23.978 --> 00:37:26.908 individuals that underwent the sham PSG,

NOTE Confidence: 0.856653341176471

 $00:37:26.910 \longrightarrow 00:37:31.011$ when they were reviewed at roughly about

NOTE Confidence: 0.856653341176471

00:37:31.011 --> 00:37:35.755 10 weeks of therapy use, they had much

NOTE Confidence: 0.856653341176471

 $00:37:35.755 \longrightarrow 00:37:38.295$ higher patient ventilator asynchrony.

 $00:37:38.300 \longrightarrow 00:37:40.598$ Index there was no difference between

NOTE Confidence: 0.856653341176471

 $00{:}37{:}40.598 \dashrightarrow 00{:}37{:}43.365$ the groups in terms of their arousal

NOTE Confidence: 0.856653341176471

00:37:43.365 --> 00:37:45.300 index during the SLEEP study.

NOTE Confidence: 0.856653341176471

 $00:37:45.300 \longrightarrow 00:37:47.533$ Any other aspects of the SLEEP study

NOTE Confidence: 0.856653341176471

 $00:37:47.533 \longrightarrow 00:37:49.837$ and there is also no difference

NOTE Confidence: 0.856653341176471

 $00:37:49.837 \longrightarrow 00:37:51.957$ in their compliance with therapy,

NOTE Confidence: 0.856653341176471

 $00:37:51.960 \longrightarrow 00:37:54.984$ their level of daytime,

NOTE Confidence: 0.856653341176471

00:37:54.984 --> 00:37:57.642 CO2 sleepiness, sleep quality,

NOTE Confidence: 0.856653341176471

 $00:37:57.642 \longrightarrow 00:37:59.926$ or nocturnal gas exchange.

NOTE Confidence: 0.856653341176471

 $00:37:59.930 \longrightarrow 00:38:02.462$ And but the interesting thing that

NOTE Confidence: 0.856653341176471

 $00:38:02.462 \longrightarrow 00:38:05.470$ came out this paper was that those

NOTE Confidence: 0.856653341176471

 $00:38:05.470 \dashrightarrow 00:38:08.368$ individuals are in the sham PSG group.

NOTE Confidence: 0.856653341176471

 $00:38:08.370 \longrightarrow 00:38:11.506$ We just had the day time titration only

NOTE Confidence: 0.856653341176471

00:38:11.506 --> 00:38:14.922 who were very poor users of therapy.

NOTE Confidence: 0.856653341176471

 $00:38:14.930 \longrightarrow 00:38:17.590$ So less than four hours a night.

00:38:17.590 --> 00:38:20.544 When they were reviewed at 10 weeks,

NOTE Confidence: 0.856653341176471

00:38:20.550 --> 00:38:23.018 they hadn't hadn't improved

NOTE Confidence: 0.856653341176471

00:38:23.018 --> 00:38:24.869 their compliance whatsoever.

NOTE Confidence: 0.856653341176471 00:38:24.870 --> 00:38:25.838 In contrast, NOTE Confidence: 0.856653341176471

 $00:38:25.838 \longrightarrow 00:38:28.742$ those individuals that had the PSG

NOTE Confidence: 0.856653341176471

 $00{:}38{:}28.742 \dashrightarrow 00{:}38{:}32.291$ titration who had been for users increase

NOTE Confidence: 0.856653341176471

 $00:38:32.291 \longrightarrow 00:38:34.791$ their usage among basic ventilation

NOTE Confidence: 0.856653341176471

 $00:38:34.870 \longrightarrow 00:38:37.406$ by by almost an hour and a half.

NOTE Confidence: 0.856653341176471

 $00{:}38{:}37.410 \dashrightarrow 00{:}38{:}38.960$ So he really suggesting that

NOTE Confidence: 0.856653341176471

 $00:38:38.960 \longrightarrow 00:38:41.030$ PSG is one of those things,

NOTE Confidence: 0.856653341176471

 $00{:}38{:}41.030 \dashrightarrow 00{:}38{:}43.190$ and and certainly something that we

NOTE Confidence: 0.856653341176471

 $00:38:43.190 \longrightarrow 00:38:46.236$ do is using it for patients who are

NOTE Confidence: 0.856653341176471

 $00:38:46.236 \longrightarrow 00:38:48.528$ not responding well to our date.

NOTE Confidence: 0.856653341176471

 $00:38:48.530 \longrightarrow 00:38:51.884$ That's where we would use the PSG

NOTE Confidence: 0.856653341176471

 $00:38:51.884 \longrightarrow 00:38:55.328$ to try and titrate and understand

NOTE Confidence: 0.856653341176471

 $00:38:55.328 \longrightarrow 00:38:58.203$ better what is about ventilatory

 $00:38:58.203 \longrightarrow 00:39:01.584$ support that the patient is just not

NOTE Confidence: 0.856653341176471

 $00{:}39{:}01.584 \dashrightarrow 00{:}39{:}04.736$ comfortable and not using it so patient

NOTE Confidence: 0.856653341176471

 $00{:}39{:}04.736 \dashrightarrow 00{:}39{:}07.277$ comfort on the rapy can sometimes be

NOTE Confidence: 0.856653341176471

 $00:39:07.277 \longrightarrow 00:39:09.720$ a good trigger to think about PSG.

NOTE Confidence: 0.856653341176471

 $00:39:09.720 \longrightarrow 00:39:12.688$ There is a lot of work now looking

NOTE Confidence: 0.856653341176471

 $00:39:12.688 \longrightarrow 00:39:15.546$ at bamboo tree models of care FCB

NOTE Confidence: 0.856653341176471

 $00:39:15.546 \longrightarrow 00:39:18.589$ for all sorts of reasons during the.

NOTE Confidence: 0.856653341176471

 $00{:}39{:}18.590 \dashrightarrow 00{:}39{:}19.748$ The COVID pandemic.

NOTE Confidence: 0.856653341176471

 $00:39:19.748 \longrightarrow 00:39:22.450$ We've had our sleep lab closed with

NOTE Confidence: 0.856653341176471

 $00:39:22.522 \longrightarrow 00:39:25.048$ only just started opening things up.

NOTE Confidence: 0.856653341176471

00:39:25.050 --> 00:39:26.790 Probably about two months ago,

NOTE Confidence: 0.856653341176471

 $00:39:26.790 \dashrightarrow 00:39:29.967$ so we've had not a great deal of access

NOTE Confidence: 0.856653341176471

 $00{:}39{:}29.967 \dashrightarrow 00{:}39{:}32.810$ to to sleep laboratory PSG titration.

NOTE Confidence: 0.856653341176471

 $00:39:32.810 \longrightarrow 00:39:35.210$ So we've been using a lot

NOTE Confidence: 0.856653341176471

 $00:39:35.210 \longrightarrow 00:39:37.024$ of ambulatory care models,

 $00:39:37.024 \longrightarrow 00:39:40.066$ again from the Victorian group are

NOTE Confidence: 0.856653341176471

 $00{:}39{:}40.066 \dashrightarrow 00{:}39{:}42.862$ showing that using a day care on

NOTE Confidence: 0.856653341176471

 $00:39:42.862 \longrightarrow 00:39:45.400$ ambulatory model of IVS set up.

NOTE Confidence: 0.856653341176471

 $00:39:45.400 \longrightarrow 00:39:47.920$ Not only was able to reduce how

NOTE Confidence: 0.856653341176471

 $00:39:47.920 \longrightarrow 00:39:50.059$ quickly they can get patients.

NOTE Confidence: 0.856653341176471

00:39:50.060 --> 00:39:52.146 Wanted therapy and this was a group

NOTE Confidence: 0.856653341176471

 $00:39:52.146 \longrightarrow 00:39:53.500$ of patients with palets,

NOTE Confidence: 0.856653341176471

 $00:39:53.500 \longrightarrow 00:39:55.345$ so it would significantly reduced

NOTE Confidence: 0.856653341176471

00:39:55.345 --> 00:39:57.617 how quickly patients to be treated

NOTE Confidence: 0.856653341176471

00:39:57.617 --> 00:40:00.116 by just bringing them in during the

NOTE Confidence: 0.856653341176471

 $00{:}40{:}00.116 \mathrel{--}{>} 00{:}40{:}02.061$ day time rather than their usual

NOTE Confidence: 0.856653341176471

00:40:02.061 --> 00:40:04.001 practice which was bringing them

NOTE Confidence: 0.856653341176471

 $00:40:04.001 \longrightarrow 00:40:06.280$ into hospital pad for a couple of

NOTE Confidence: 0.856653341176471

 $00{:}40{:}06.280 \dashrightarrow 00{:}40{:}08.453$ days and then doing a PSG and.

NOTE Confidence: 0.856653341176471

00:40:08.453 --> 00:40:10.691 The important thing about this study

NOTE Confidence: 0.856653341176471

 $00{:}40{:}10.691 \dashrightarrow 00{:}40{:}13.000$ was that those patients that were.

00:40:15.600 --> 00:40:19.106 Set up in this manner with the day

NOTE Confidence: 0.8849954

 $00:40:19.106 \longrightarrow 00:40:21.438$ set up actually had better survival

NOTE Confidence: 0.8849954

 $00:40:21.438 \longrightarrow 00:40:24.421$ at 12 months and there's a number

NOTE Confidence: 0.8849954

00:40:24.421 --> 00:40:27.274 of studies showing exactly the same

NOTE Confidence: 0.8849954

 $00:40:27.274 \longrightarrow 00:40:30.110$ thing that that the daytime setup

NOTE Confidence: 0.8849954

 $00:40:30.110 \longrightarrow 00:40:32.435$ isn't inferior to the inpatient

NOTE Confidence: 0.8849954

00:40:32.435 --> 00:40:34.698 acclimation in terms of changes in

NOTE Confidence: 0.8849954

00:40:34.698 --> 00:40:36.780 quality of life changes in CO2,

NOTE Confidence: 0.8849954

 $00:40:36.780 \longrightarrow 00:40:39.156$ and it is can be much more cost effective.

NOTE Confidence: 0.707298586666667

00:40:41.720 --> 00:40:43.028 How we would have, you know,

NOTE Confidence: 0.707298586666667

00:40:43.030 --> 00:40:44.854 approached set up with this ambled

NOTE Confidence: 0.707298586666667

 $00:40:44.854 \longrightarrow 00:40:47.118$ remodel how we use transfer case carbon

NOTE Confidence: 0.707298586666667

 $00{:}40{:}47.118 \dashrightarrow 00{:}40{:}49.407$ dioxide monitoring quite a bit so we

NOTE Confidence: 0.707298586666667

 $00:40:49.474 \longrightarrow 00:40:51.427$ would set the patient up with that

NOTE Confidence: 0.707298586666667

 $00:40:51.430 \longrightarrow 00:40:53.901$ we would mask fit them with whatever

 $00:40:53.901 \longrightarrow 00:40:56.177$ mask was most comfortable and then

NOTE Confidence: 0.707298586666667

00:40:56.177 --> 00:40:58.844 if the patient has a diagnosis of

NOTE Confidence: 0.707298586666667

 $00:40:58.850 \longrightarrow 00:41:02.588$ COPD we would start with M&ST mode.

NOTE Confidence: 0.707298586666667

 $00:41:02.588 \longrightarrow 00:41:05.042$ Will be back up rate somewhere

NOTE Confidence: 0.707298586666667

00:41:05.042 --> 00:41:07.905 between 14 and 15 by perhaps starting

NOTE Confidence: 0.707298586666667

 $00:41:07.905 \longrightarrow 00:41:10.660$ 12 to 15 centimeters in the pack.

NOTE Confidence: 0.707298586666667

00:41:10.660 --> 00:41:14.062 Alright, and then sitting out Eli minimum

NOTE Confidence: 0.707298586666667

 $00:41:14.062 \longrightarrow 00:41:17.030$ and maximum on these individuals of the

NOTE Confidence: 0.707298586666667

00:41:17.030 --> 00:41:19.820 web using a certain devices and arise,

NOTE Confidence: 0.707298586666667

 $00:41:19.820 \longrightarrow 00:41:22.220$ time will be the one to two or 100 to

NOTE Confidence: 0.707298586666667

 $00{:}41{:}22.293 \dashrightarrow 00{:}41{:}24.477$ 200 milliseconds and adding the same

NOTE Confidence: 0.707298586666667

 $00{:}41{:}24.477 \dashrightarrow 00{:}41{:}27.033$ amount of oxygen is that what they

NOTE Confidence: 0.707298586666667

 $00:41:27.033 \longrightarrow 00:41:29.441$ would normally have in during the day.

NOTE Confidence: 0.707298586666667

 $00:41:29.450 \longrightarrow 00:41:30.515$ We would then,

NOTE Confidence: 0.707298586666667

00:41:30.515 --> 00:41:32.645 if it was a neuromuscular patient,

NOTE Confidence: 0.707298586666667

 $00:41:32.650 \longrightarrow 00:41:33.254$ very similar,

 $00:41:33.254 \longrightarrow 00:41:35.368$ except that usually will start with a

NOTE Confidence: 0.707298586666667

 $00:41:35.368 \longrightarrow 00:41:37.418$ lower back up rate just to begin with.

NOTE Confidence: 0.707298586666667

 $00:41:37.420 \longrightarrow 00:41:39.086$ How to make sure that they they

NOTE Confidence: 0.707298586666667

 $00:41:39.086 \longrightarrow 00:41:40.570$ feel like they have some control

NOTE Confidence: 0.707298586666667

 $00:41:40.570 \longrightarrow 00:41:42.236$ and see how good they are at

NOTE Confidence: 0.707298586666667

00:41:42.293 --> 00:41:43.897 actually triggering the device?

NOTE Confidence: 0.707298586666667

 $00:41:43.900 \longrightarrow 00:41:45.625$ Setting them up more iPads

NOTE Confidence: 0.707298586666667

00:41:45.625 --> 00:41:47.780 for roughly the same E pets.

NOTE Confidence: 0.707298586666667 00:41:47.780 --> 00:41:48.512 And again, NOTE Confidence: 0.707298586666667

00:41:48.512 --> 00:41:50.948 if the device had minimum and

NOTE Confidence: 0.707298586666667

00:41:50.948 --> 00:41:52.400 maximum inspiratory times,

NOTE Confidence: 0.707298586666667

 $00:41:52.400 \longrightarrow 00:41:55.360$ setting that and rise time,

NOTE Confidence: 0.707298586666667

 $00{:}41{:}55.360 {\:{\mbox{--}}\!\!>}\ 00{:}41{:}58.021$ usually at a much slower slope

NOTE Confidence: 0.707298586666667

 $00:41:58.021 \longrightarrow 00:42:00.876$ at 200 to 300 milliseconds.

NOTE Confidence: 0.707298586666667

 $00:42:00.880 \longrightarrow 00:42:04.258$ For two to three independent events,

00:42:04.260 --> 00:42:08.050 we would then during that that period

NOTE Confidence: 0.707298586666667

 $00:42:08.050 \longrightarrow 00:42:10.535$ we passed during the day up titrate

NOTE Confidence: 0.707298586666667

 $00:42:10.535 \longrightarrow 00:42:13.057$ the IPAP and changed the settings,

NOTE Confidence: 0.707298586666667

 $00:42:13.060 \longrightarrow 00:42:15.391$ trying to increase the iPad to whatever

NOTE Confidence: 0.707298586666667

 $00:42:15.391 \longrightarrow 00:42:17.225$ they could maximally tolerated while

NOTE Confidence: 0.707298586666667

00:42:17.225 --> 00:42:19.553 looking at the title volume spiritually,

NOTE Confidence: 0.7072985866666667 00:42:19.560 --> 00:42:20.320 rate leak,

NOTE Confidence: 0.707298586666667

 $00:42:20.320 \longrightarrow 00:42:22.979$ and the impact they're having on CO2.

NOTE Confidence: 0.707298586666667

 $00:42:22.979 \longrightarrow 00:42:25.253$ How and often makes individuals will

NOTE Confidence: 0.707298586666667

 $00:42:25.253 \longrightarrow 00:42:28.438$ fall off to sleep so we can actually

NOTE Confidence: 0.707298586666667

 $00{:}42{:}28.438 \dashrightarrow 00{:}42{:}30.910$ capture what's going on during sleep.

NOTE Confidence: 0.707298586666667

 $00:42:30.910 \longrightarrow 00:42:31.612$ We would then,

NOTE Confidence: 0.707298586666667

 $00:42:31.612 \longrightarrow 00:42:33.250$ if they did pull up to sleep,

NOTE Confidence: 0.707298586666667

 $00:42:33.250 \longrightarrow 00:42:36.071$ we can then adjust the epac part

NOTE Confidence: 0.707298586666667

 $00:42:36.071 \longrightarrow 00:42:38.228$ as necessary and then we would

NOTE Confidence: 0.707298586666667

 $00:42:38.228 \longrightarrow 00:42:40.250$ send them home and do remote

00:42:40.324 --> 00:42:42.412 monitoring with ongoing titration

NOTE Confidence: 0.707298586666667

 $00:42:42.412 \longrightarrow 00:42:45.348$ of settings it's needed and with

NOTE Confidence: 0.707298586666667

00:42:45.348 --> 00:42:47.468 looking at Target title bonds,

NOTE Confidence: 0.707298586666667

 $00:42:47.470 \longrightarrow 00:42:49.252$ which we may not have achieved

NOTE Confidence: 0.707298586666667

 $00:42:49.252 \longrightarrow 00:42:50.750$ on that very first day.

NOTE Confidence: 0.707298586666667

00:42:50.750 --> 00:42:53.198 But looking at the target volumes,

NOTE Confidence: 0.707298586666667

00:42:53.200 --> 00:42:56.315 about 6 to 8 mil for the NEUROMUSCULAR'S

NOTE Confidence: 0.707298586666667

 $00:42:56.315 \longrightarrow 00:42:59.010$ and the eight to 10 patients with

NOTE Confidence: 0.707298586666667

00:42:59.010 --> 00:43:01.548 COPD and looking at using that.

NOTE Confidence: 0.707298586666667

 $00:43:01.550 \longrightarrow 00:43:03.926$ You might wanna try to adjust the epep.

NOTE Confidence: 0.707298586666667

 $00{:}43{:}03.930 \dashrightarrow 00{:}43{:}07.960$ Often these individuals have integrated.

NOTE Confidence: 0.707298586666667

 $00:43:07.960 \longrightarrow 00:43:09.584$ Oximeters that we can.

NOTE Confidence: 0.707298586666667

 $00{:}43{:}09.584 \dashrightarrow 00{:}43{:}13.239$ Into the machine or a an external one,

NOTE Confidence: 0.707298586666667

 $00:43:13.240 \longrightarrow 00:43:15.532$ and we will actually monitor what

NOTE Confidence: 0.707298586666667

 $00:43:15.532 \longrightarrow 00:43:17.660$ their situation is doing as well,

 $00:43:17.660 \longrightarrow 00:43:19.886$ and and by remote monitoring looking at

NOTE Confidence: 0.707298586666667

00:43:19.886 --> 00:43:22.257 things like that leak or paddle boarding,

NOTE Confidence: 0.707298586666667

 $00:43:22.260 \longrightarrow 00:43:24.040$ respiratory rate and usage

NOTE Confidence: 0.707298586666667

 $00:43:24.040 \longrightarrow 00:43:26.265$ and making changes on that.

NOTE Confidence: 0.707298586666667

 $00:43:26.270 \longrightarrow 00:43:28.292$ If the patient isn't doing well

NOTE Confidence: 0.707298586666667

 $00:43:28.292 \longrightarrow 00:43:30.520$ we will bring them back to PSG,

NOTE Confidence: 0.707298586666667

00:43:30.520 --> 00:43:33.055 but otherwise I clinical reviews

NOTE Confidence: 0.707298586666667

 $00:43:33.055 \longrightarrow 00:43:35.369$ looking at in particular the

NOTE Confidence: 0.707298586666667

 $00{:}43{:}35.369 \dashrightarrow 00{:}43{:}37.967$ information that we can get from

NOTE Confidence: 0.707298586666667

 $00:43:37.967 \longrightarrow 00:43:40.530$ either the cloud or from the data.

NOTE Confidence: 0.707298586666667

 $00:43:40.530 \longrightarrow 00:43:42.760$ And certainly there are now

NOTE Confidence: 0.707298586666667

00:43:42.760 --> 00:43:45.102 studies showing that patients set

NOTE Confidence: 0.707298586666667

00:43:45.102 --> 00:43:48.108 up in hospital compared to those

NOTE Confidence: 0.707298586666667

00:43:48.110 --> 00:43:51.130 set up include home initiation,

NOTE Confidence: 0.707298586666667

 $00:43:51.130 \longrightarrow 00:43:52.654$ which is sort of this study

NOTE Confidence: 0.707298586666667

 $00:43:52.654 \longrightarrow 00:43:53.670$ out of the Netherlands,

 $00:43:53.670 \longrightarrow 00:43:55.810$ which is quite small country.

NOTE Confidence: 0.93374719

 $00{:}43{:}55.810 \dashrightarrow 00{:}43{:}58.970$ But they by setting patients up in home,

NOTE Confidence: 0.93374719

 $00:43:58.970 \longrightarrow 00:44:01.532$ found that the long term an invasive

NOTE Confidence: 0.93374719

 $00:44:01.532 \longrightarrow 00:44:03.547$ ventilation over six months wasn't

NOTE Confidence: 0.93374719

 $00:44:03.547 \longrightarrow 00:44:05.667$ inferior to in hospital with

NOTE Confidence: 0.93374719

00:44:05.667 --> 00:44:07.712 similar improvements in CO2 and

NOTE Confidence: 0.93374719

 $00:44:07.712 \longrightarrow 00:44:10.169$ health related quality of life.

NOTE Confidence: 0.93374719

00:44:10.169 --> 00:44:11.918 And very significantly

NOTE Confidence: 0.93374719

 $00{:}44{:}11.918 \dashrightarrow 00{:}44{:}13.667$ improvements in savings.

NOTE Confidence: 0.93374719

00:44:13.670 --> 00:44:14.940 But the important thing though,

NOTE Confidence: 0.93374719

 $00:44:14.940 \longrightarrow 00:44:16.810$ is remembering that in this

NOTE Confidence: 0.93374719

 $00:44:16.810 \longrightarrow 00:44:18.680$ particular study they used remote

NOTE Confidence: 0.93374719

 $00:44:18.744 \longrightarrow 00:44:20.862$ monitoring and they did use CO2.

NOTE Confidence: 0.93374719

00:44:20.862 --> 00:44:23.634 Transmitting is CO2 in the home,

NOTE Confidence: 0.93374719

 $00:44:23.640 \longrightarrow 00:44:26.720$ which is not available to all centers

 $00:44:26.720 \longrightarrow 00:44:30.164$ that are doing this type of therapy.

NOTE Confidence: 0.93374719

 $00:44:30.170 \longrightarrow 00:44:32.425$ So what about inpatient and

NOTE Confidence: 0.93374719

 $00:44:32.425 \longrightarrow 00:44:34.512$ outpatient in Ivy in COPD?

NOTE Confidence: 0.93374719

00:44:34.512 --> 00:44:36.486 And I think you know up front.

NOTE Confidence: 0.93374719

 $00:44:36.490 \longrightarrow 00:44:38.821$ We have to be very careful which

NOTE Confidence: 0.93374719

 $00:44:38.821 \longrightarrow 00:44:41.125$ patients with COPD that we put on

NOTE Confidence: 0.93374719

 $00:44:41.125 \longrightarrow 00:44:42.433$ long invasive installation because

NOTE Confidence: 0.93374719

00:44:42.433 --> 00:44:44.263 not all patients will respond and

NOTE Confidence: 0.93374719

 $00{:}44{:}44.263 \dashrightarrow 00{:}44{:}46.437$ hence we've got a lot of literature

NOTE Confidence: 0.93374719

 $00:44:46.437 \longrightarrow 00:44:48.803$ with quite variable or not and and

NOTE Confidence: 0.93374719

 $00:44:48.803 \longrightarrow 00:44:51.618$ conflicting results regarding women based

NOTE Confidence: 0.93374719

 $00:44:51.618 \longrightarrow 00:44:54.571$ ventilation and stable public XCOPD.

NOTE Confidence: 0.93374719

00:44:54.571 --> 00:44:55.052 However,

NOTE Confidence: 0.93374719

 $00:44:55.052 \longrightarrow 00:44:57.938$ you know one of the recent

NOTE Confidence: 0.93374719

 $00:44:57.938 \longrightarrow 00:45:00.568$ guidelines from the ATS looking at.

NOTE Confidence: 0.93374719

 $00:45:00.570 \longrightarrow 00:45:01.738$ We use it in,

00:45:01.738 --> 00:45:03.490 I think in this particular population,

NOTE Confidence: 0.93374719

 $00:45:03.490 \longrightarrow 00:45:05.130$ some of the questions that

NOTE Confidence: 0.93374719

 $00:45:05.130 \longrightarrow 00:45:07.420$ we we looked at was firstly,

NOTE Confidence: 0.93374719

00:45:07.420 --> 00:45:11.316 should it be used versus usual tier and

NOTE Confidence: 0.93374719

 $00:45:11.320 \longrightarrow 00:45:13.440$ the suggestion the recommendation was

NOTE Confidence: 0.93374719

 $00:45:13.440 \longrightarrow 00:45:16.549$ to to use it with moderate certainty

NOTE Confidence: 0.93374719

 $00:45:16.549 \longrightarrow 00:45:20.189$ based on the evidence that is out there.

NOTE Confidence: 0.93374719

 $00:45:20.190 \longrightarrow 00:45:24.950$ Then another question that we tackled was,

NOTE Confidence: 0.93374719

 $00:45:24.950 \longrightarrow 00:45:28.856$ should it be used and initiated in

NOTE Confidence: 0.93374719

 $00:45:28.856 \longrightarrow 00:45:31.022$ patients hospitalized just immediately

NOTE Confidence: 0.93374719

 $00:45:31.022 \longrightarrow 00:45:33.627$ after acute exasperation with acute

NOTE Confidence: 0.93374719

00:45:33.627 --> 00:45:35.810 and chronic respiratory failure,

NOTE Confidence: 0.93374719

 $00{:}45{:}35.810 \dashrightarrow 00{:}45{:}39.895$ and our recommendation was conditionally

NOTE Confidence: 0.93374719

 $00:45:39.895 \longrightarrow 00:45:43.345$ not to be and instead waiting a

NOTE Confidence: 0.93374719

 $00:45:43.345 \longrightarrow 00:45:46.525$ couple a couple of weeks to make sure

 $00:45:46.525 \longrightarrow 00:45:49.093$ that the patient was still hypercapnic.

NOTE Confidence: 0.93374719

00:45:49.100 --> 00:45:49.920 But again,

NOTE Confidence: 0.93374719

 $00:45:49.920 \longrightarrow 00:45:51.150$ that recommendation came.

NOTE Confidence: 0.93374719

 $00:45:51.150 \longrightarrow 00:45:52.536$ It's no certainty.

NOTE Confidence: 0.93374719

 $00:45:52.536 \longrightarrow 00:45:53.460$ Before softly,

NOTE Confidence: 0.93374719

 $00:45:53.460 \longrightarrow 00:45:56.204$ the limited evidence that was out there,

NOTE Confidence: 0.93374719

 $00:45:56.210 \longrightarrow 00:45:59.024$ and finally should be beat should

NOTE Confidence: 0.93374719

 $00:45:59.024 \longrightarrow 00:46:01.444$ long term non invasive ventilation

NOTE Confidence: 0.93374719

00:46:01.444 --> 00:46:03.937 be determined using overnight PSG

NOTE Confidence: 0.93374719

 $00{:}46{:}03.937 \dashrightarrow 00{:}46{:}06.357$ in this particular population and

NOTE Confidence: 0.93374719

 $00:46:06.357 \longrightarrow 00:46:08.293$ again the recommended conditional

NOTE Confidence: 0.93374719

 $00:46:08.366 \longrightarrow 00:46:10.550$ recommendation was not to use it

NOTE Confidence: 0.93374719

00:46:10.550 --> 00:46:13.916 not to use PSG overnight titration,

NOTE Confidence: 0.93374719

 $00:46:13.920 \longrightarrow 00:46:16.385$ though that was associated with

NOTE Confidence: 0.93374719

 $00:46:16.385 \longrightarrow 00:46:19.376$ low very low certainty around the

NOTE Confidence: 0.93374719

 $00:46:19.376 \longrightarrow 00:46:21.596$ data quickly available to us.

 $00{:}46{:}21.600 \dashrightarrow 00{:}46{:}22.744$ The power that recommendation

NOTE Confidence: 0.93374719

 $00:46:22.744 \longrightarrow 00:46:24.779$ came from the fact that we use

NOTE Confidence: 0.93374719

 $00:46:24.779 \longrightarrow 00:46:26.099$ is high in this population.

NOTE Confidence: 0.93374719

 $00{:}46{:}26.100 \dashrightarrow 00{:}46{:}27.942$ High intensity or high pressure in

NOTE Confidence: 0.93374719

 $00:46:27.942 \longrightarrow 00:46:30.888$ Ivy seems to be the way in which we

NOTE Confidence: 0.93374719

 $00:46:30.888 \longrightarrow 00:46:32.543$ should be treating these patients.

NOTE Confidence: 0.93374719

 $00:46:32.550 \longrightarrow 00:46:35.735$ So this is a specific approach to

NOTE Confidence: 0.93374719

 $00{:}46{:}35.735 \dashrightarrow 00{:}46{:}37.540$ ventilating these individuals where

NOTE Confidence: 0.93374719

 $00{:}46{:}37.540 \dashrightarrow 00{:}46{:}40.552$ you going to use higher settings

NOTE Confidence: 0.93374719

 $00:46:40.552 \longrightarrow 00:46:43.750$ and you might normally think about.

NOTE Confidence: 0.93374719

 $00{:}46{:}43.750 \dashrightarrow 00{:}46{:}46.612$ But the idea is not to get the maximum,

NOTE Confidence: 0.93374719

 $00:46:46.620 \longrightarrow 00:46:48.052$ but rather you try.

NOTE Confidence: 0.93374719

00:46:48.052 --> 00:46:49.842 You're looking very carefully at

NOTE Confidence: 0.93374719

 $00:46:49.842 \longrightarrow 00:46:52.068$ the CO2 and trying to achieve normal

NOTE Confidence: 0.93374719

 $00:46:52.068 \longrightarrow 00:46:54.532$ cap near or at the lowest CO2

00:46:54.532 --> 00:46:57.844 abuse and possible so around about.

NOTE Confidence: 0.93374719

 $00{:}46{:}57.850 \dashrightarrow 00{:}47{:}01.553$ You know 20% or CO2 list then have

NOTE Confidence: 0.93374719

 $00:47:01.553 \longrightarrow 00:47:03.971$ 48 millimeters of mercury and that's

NOTE Confidence: 0.93374719

 $00:47:03.971 \longrightarrow 00:47:07.169$ achieved in a stepwise titration by Pat.

NOTE Confidence: 0.93374719

 $00:47:07.170 \longrightarrow 00:47:09.774$ And again this measure analysis by

NOTE Confidence: 0.93374719

00:47:09.774 --> 00:47:12.160 all and colleagues recently published

NOTE Confidence: 0.93374719

 $00:47:12.160 \longrightarrow 00:47:14.456$ showing that those individuals.

NOTE Confidence: 0.93374719

00:47:14.460 --> 00:47:18.204 Which CRPG where a targeted approach

NOTE Confidence: 0.93374719

 $00{:}47{:}18.204 \dashrightarrow 00{:}47{:}20.902$ to NI V trans, normally CO2.

NOTE Confidence: 0.93374719

00:47:20.902 --> 00:47:24.388 You've got much better daytime CO2

NOTE Confidence: 0.93374719

00:47:24.388 --> 00:47:26.867 reductions compared to not targeting

NOTE Confidence: 0.93374719

 $00:47:26.867 \longrightarrow 00:47:29.737$ the CO2 which fits in also with

NOTE Confidence: 0.805317614444445

 $00:47:29.824 \longrightarrow 00:47:32.556$ the recommendations from European

NOTE Confidence: 0.8053176144444445

00:47:32.556 --> 00:47:35.696 spiritually as society and this high

NOTE Confidence: 0.805317614444445

 $00:47:35.696 \longrightarrow 00:47:37.506$ intensity approach can't be achieved

NOTE Confidence: 0.805317614444445

00:47:37.506 --> 00:47:39.158 in single night, particularly,

 $00{:}47{:}39.158 \dashrightarrow 00{:}47{:}41.648$ people are doing a diagnostic

NOTE Confidence: 0.805317614444445

00:47:41.650 --> 00:47:43.890 diagnostic half titration study.

NOTE Confidence: 0.805317614444445

00:47:43.890 --> 00:47:47.817 In Europe they used to admit patients

NOTE Confidence: 0.805317614444445

00:47:47.817 --> 00:47:51.204 for four to seven days in our country

NOTE Confidence: 0.805317614444445

 $00:47:51.204 \longrightarrow 00:47:52.894$ as someone who's otherwise well,

NOTE Confidence: 0.805317614444445

00:47:52.900 --> 00:47:54.622 our patients don't wanna come into

NOTE Confidence: 0.805317614444445

00:47:54.622 --> 00:47:56.209 hospital for that period of time,

NOTE Confidence: 0.805317614444445

 $00:47:56.210 \longrightarrow 00:47:59.950$ nor do we often have bed capacity to do that.

NOTE Confidence: 0.805317614444445

 $00:47:59.950 \longrightarrow 00:48:02.476$ So this is where remote monitoring

NOTE Confidence: 0.805317614444445

 $00:48:02.476 \longrightarrow 00:48:04.160$ titration becomes incredibly important.

NOTE Confidence: 0.805317614444445

00:48:04.160 --> 00:48:06.484 And again, the group out of the

NOTE Confidence: 0.805317614444445

 $00{:}48{:}06.484 \dashrightarrow 00{:}48{:}08.209$ Netherlands have looked at even

NOTE Confidence: 0.805317614444445

 $00{:}48{:}08.209 \dashrightarrow 00{:}48{:}10.420$ setting the patients with COPD at

NOTE Confidence: 0.8053176144444445

00:48:10.420 --> 00:48:13.060 home compared to being in hospital.

NOTE Confidence: 0.805317614444445

 $00:48:13.060 \longrightarrow 00:48:14.716$ And while it may have taken

 $00:48:14.716 \longrightarrow 00:48:15.820$ longer for the patients.

NOTE Confidence: 0.805317614444445

 $00:48:15.820 \longrightarrow 00:48:18.186$ To get to those higher pressures when

NOTE Confidence: 0.805317614444445

00:48:18.186 --> 00:48:20.920 they were being treated and set up

NOTE Confidence: 0.805317614444445

00:48:20.920 --> 00:48:23.898 at home and over the next six months,

NOTE Confidence: 0.805317614444445

 $00:48:23.900 \longrightarrow 00:48:26.588$ there was no difference in the the CO2

NOTE Confidence: 0.805317614444445

 $00:48:26.588 \longrightarrow 00:48:29.194$ between those that were set up in hospital

NOTE Confidence: 0.805317614444445

 $00:48:29.194 \longrightarrow 00:48:31.480$ and those that were set up at home.

NOTE Confidence: 0.805317614444445

 $00:48:31.480 \longrightarrow 00:48:33.315$ And similarly the health related

NOTE Confidence: 0.805317614444445

 $00:48:33.315 \longrightarrow 00:48:35.863$ quality of life improved to a similar

NOTE Confidence: 0.805317614444445

 $00:48:35.863 \longrightarrow 00:48:38.290$ degree with those patients that were

NOTE Confidence: 0.805317614444445

00:48:38.290 --> 00:48:42.013 set up within might be at home having

NOTE Confidence: 0.805317614444445

 $00:48:42.013 \longrightarrow 00:48:44.583$ significantly reduced costs of care.

NOTE Confidence: 0.805317614444445

00:48:44.590 --> 00:48:46.960 Remote monitoring is becoming very,

NOTE Confidence: 0.8053176144444445

00:48:46.960 --> 00:48:49.700 very important how your devices

NOTE Confidence: 0.805317614444445

00:48:49.700 --> 00:48:51.892 have really excellent information

NOTE Confidence: 0.805317614444445

 $00{:}48{:}51.892 \dashrightarrow 00{:}48{:}54.425$ around calligraphy and we can

00:48:54.425 --> 00:48:56.329 get information about flow,

NOTE Confidence: 0.805317614444445

00:48:56.330 --> 00:48:57.114 tidal boarding,

NOTE Confidence: 0.805317614444445

 $00:48:57.114 \longrightarrow 00:48:59.466$ the spiritual rate in some devices.

NOTE Confidence: 0.805317614444445

 $00:48:59.470 \longrightarrow 00:49:01.745$ It's even breath by breath so and

NOTE Confidence: 0.805317614444445

 $00:49:01.745 \longrightarrow 00:49:03.668$ we use that quite a lot.

NOTE Confidence: 0.805317614444445

00:49:03.670 --> 00:49:05.614 This information we can upload it

NOTE Confidence: 0.805317614444445

 $00:49:05.614 \longrightarrow 00:49:08.554$ to the cloud had it providing that

NOTE Confidence: 0.805317614444445

 $00:49:08.554 \longrightarrow 00:49:10.798$ ability to identify patients early,

NOTE Confidence: 0.805317614444445

00:49:10.798 --> 00:49:13.022 but I think one of the things before

NOTE Confidence: 0.805317614444445

 $00:49:13.022 \longrightarrow 00:49:14.997$ we get too far down the track.

NOTE Confidence: 0.8053176144444445

00:49:15.000 --> 00:49:17.905 We need a lot more information about

NOTE Confidence: 0.805317614444445

 $00:49:17.905 \longrightarrow 00:49:20.669$ how accurate and how liable all of

NOTE Confidence: 0.805317614444445

 $00{:}49{:}20.669 \to 00{:}49{:}23.556$ these parameters that are coming to us,

NOTE Confidence: 0.8053176144444445

 $00:49:23.560 \longrightarrow 00:49:26.003$ and really how we should be using

NOTE Confidence: 0.805317614444445

 $00:49:26.003 \longrightarrow 00:49:28.341$ this data in interpreting how

 $00:49:28.341 \longrightarrow 00:49:30.147$ which we're going to be changing.

NOTE Confidence: 0.805317614444445 00:49:30.150 --> 00:49:30.992 You know, NOTE Confidence: 0.805317614444445

00:49:30.992 --> 00:49:33.097 settings and clinical management of

NOTE Confidence: 0.805317614444445

 $00:49:33.097 \longrightarrow 00:49:34.820$ these individuals because depending

NOTE Confidence: 0.805317614444445

 $00:49:34.820 \longrightarrow 00:49:37.208$ on the manufacturer of these devices,

NOTE Confidence: 0.805317614444445

 $00:49:37.210 \longrightarrow 00:49:40.270$ they can often define leaks or

NOTE Confidence: 0.805317614444445

 $00:49:40.270 \longrightarrow 00:49:42.808$ define how admin had partners

NOTE Confidence: 0.805317614444445

 $00:49:42.808 \longrightarrow 00:49:45.338$ are are expressed with these.

NOTE Confidence: 0.805317614444445

 $00:49:45.340 \longrightarrow 00:49:47.308$ Machine so we need to know a lot

NOTE Confidence: 0.805317614444445

00:49:47.308 --> 00:49:48.977 more about their algorithms and

NOTE Confidence: 0.8053176144444445

 $00{:}49{:}48.977 \dashrightarrow 00{:}49{:}50.837$ how reliable they actually are.

NOTE Confidence: 0.805317614444445

00:49:50.840 --> 00:49:53.184 So I just want to finish up and

NOTE Confidence: 0.805317614444445

 $00:49:53.184 \longrightarrow 00:49:55.392$ showing him this is a lady that we

NOTE Confidence: 0.8053176144444445

00:49:55.392 --> 00:49:58.115 had a number of years ago with severe

NOTE Confidence: 0.805317614444445

00:49:58.115 --> 00:50:01.440 COPD constantly coming into hospital

NOTE Confidence: 0.805317614444445

 $00:50:01.440 \longrightarrow 00:50:04.290$ with with an exacerbation moderate

00:50:04.290 --> 00:50:07.570 cognitive impairment when we saw her,

NOTE Confidence: 0.805317614444445

 $00:50:07.570 \longrightarrow 00:50:10.082$ we had put her on a cute non invasive

NOTE Confidence: 0.805317614444445

 $00:50:10.082 \longrightarrow 00:50:11.950$ ventilation was award happy Kapnick

NOTE Confidence: 0.805317614444445

00:50:11.950 --> 00:50:14.125 discharged her husband who was

NOTE Confidence: 0.805317614444445

 $00:50:14.125 \longrightarrow 00:50:15.730$ at that stage 90.

NOTE Confidence: 0.805317614444445

00:50:15.730 --> 00:50:17.872 Said I would like to try this at home.

NOTE Confidence: 0.805317614444445

 $00:50:17.880 \longrightarrow 00:50:19.868$ We weren't sure they were going to

NOTE Confidence: 0.805317614444445

 $00{:}50{:}19.868 \longrightarrow 00{:}50{:}21.787$ manage but we gave them a trial

NOTE Confidence: 0.805317614444445

 $00:50:21.790 \longrightarrow 00:50:23.848$ three months and three weeks later we

NOTE Confidence: 0.805317614444445

 $00:50:23.848 \longrightarrow 00:50:25.820$ brought her back to our outpatients.

NOTE Confidence: 0.8053176144444445

00:50:25.820 --> 00:50:27.710 She was actually using it really well,

NOTE Confidence: 0.805317614444445

 $00{:}50{:}27.710 \dashrightarrow 00{:}50{:}31.232$ but a CO2 was still high at at 54

NOTE Confidence: 0.805317614444445

 $00{:}50{:}31.232 \dashrightarrow 00{:}50{:}33.764$ when we downloaded from the card.

NOTE Confidence: 0.805317614444445

 $00{:}50{:}33.770 \dashrightarrow 00{:}50{:}35.774$ The information you can see she

NOTE Confidence: 0.805317614444445

 $00:50:35.774 \longrightarrow 00:50:37.110$ had really quite high.

00:50:37.110 --> 00:50:37.609 Hi,

NOTE Confidence: 0.805317614444445

00:50:37.609 --> 00:50:40.104 the title bombings here were

NOTE Confidence: 0.805317614444445

00:50:40.104 --> 00:50:42.100 under 400 mills hand,

NOTE Confidence: 0.805317614444445

 $00:50:42.100 \longrightarrow 00:50:44.578$ but leak was not a problem

NOTE Confidence: 0.882010495

 $00:50:44.580 \longrightarrow 00:50:46.300$ and when we looked at the breath by.

NOTE Confidence: 0.882010495

 $00:50:46.300 \longrightarrow 00:50:48.524$ Risk we could see that she was actually

NOTE Confidence: 0.882010495

 $00:50:48.524 \longrightarrow 00:50:50.580$ still having quite a lot of obstruction.

NOTE Confidence: 0.882010495

00:50:50.580 --> 00:50:53.060 She was on a full face mask and she wasn't

NOTE Confidence: 0.882010495

 $00:50:53.123 \longrightarrow 00:50:56.421$ going to use anything else, so we come.

NOTE Confidence: 0.882010495

 $00:50:56.421 \longrightarrow 00:50:59.823$ Decided that we needed fire pressures.

NOTE Confidence: 0.882010495

 $00:50:59.830 \longrightarrow 00:51:03.070$ We talked them into being able to remote

NOTE Confidence: 0.882010495

 $00{:}51{:}03.070 \longrightarrow 00{:}51{:}04.988$ remote monitor them and change the

NOTE Confidence: 0.882010495

 $00:51:04.988 \longrightarrow 00:51:07.414$ settings and you can see over the next

NOTE Confidence: 0.882010495

 $00:51:07.414 \longrightarrow 00:51:09.520$ little while we gradually increased the

NOTE Confidence: 0.882010495

 $00:51:09.520 \longrightarrow 00:51:11.996$ pressures and we got to the point where we

NOTE Confidence: 0.882010495

 $00:51:11.996 \longrightarrow 00:51:14.442$ had enough increasingly PAP and support.

 $00:51:14.442 \longrightarrow 00:51:18.069$ You can see this dramatic drop in the

NOTE Confidence: 0.882010495

 $00:51:18.069 \longrightarrow 00:51:21.212$ AHI the improvement in title volumes and

NOTE Confidence: 0.882010495

00:51:21.212 --> 00:51:24.981 now the patient with the backup rate was

NOTE Confidence: 0.882010495

00:51:24.981 --> 00:51:27.346 being much much more passively ventilated.

NOTE Confidence: 0.882010495

 $00:51:27.346 \longrightarrow 00:51:30.145$ Which is what we were trying to achieve

NOTE Confidence: 0.882010495

 $00:51:30.145 \longrightarrow 00:51:32.850$ when we looked at the breath by breath data.

NOTE Confidence: 0.882010495

 $00:51:32.850 \longrightarrow 00:51:35.352$ Much better we had actually control

NOTE Confidence: 0.882010495

 $00:51:35.352 \longrightarrow 00:51:37.670$ that upper airway obstruction remotely.

NOTE Confidence: 0.882010495

 $00{:}51{:}37.670 \longrightarrow 00{:}51{:}39.710$ We brought it back for a blood gas

NOTE Confidence: 0.882010495

 $00{:}51{:}39.710 \dashrightarrow 00{:}51{:}42.047$ and you can see that she now had a

NOTE Confidence: 0.882010495

 $00:51:42.047 \longrightarrow 00:51:44.136$ normal CO2 and three years down the

NOTE Confidence: 0.882010495

00:51:44.136 --> 00:51:45.360 track she's still going,

NOTE Confidence: 0.882010495

 $00{:}51{:}45.360 \dashrightarrow 00{:}51{:}47.285$ so we're certainly seeing increased

NOTE Confidence: 0.882010495

 $00:51:47.285 \longrightarrow 00:51:49.210$ use of client information for

NOTE Confidence: 0.882010495

00:51:49.278 --> 00:51:50.940 chronic respiratory failure.

 $00:51:50.940 \longrightarrow 00:51:53.140$ Lots more devices with broadening

NOTE Confidence: 0.882010495

 $00{:}51{:}53.140 \dashrightarrow 00{:}51{:}55.692$ our range of modes available to

NOTE Confidence: 0.882010495

00:51:55.692 --> 00:51:57.617 us to help us try and match.

NOTE Confidence: 0.882010495

 $00:51:57.620 \longrightarrow 00:51:59.654$ That the spiritual needs of the

NOTE Confidence: 0.882010495

 $00:51:59.654 \longrightarrow 00:52:01.490$ patient to the ventilator output.

NOTE Confidence: 0.882010495

 $00:52:01.490 \longrightarrow 00:52:03.690$ Thinking about all those

NOTE Confidence: 0.882010495

00:52:03.690 --> 00:52:05.340 alternatives appear sketchy,

NOTE Confidence: 0.882010495

 $00:52:05.340 \longrightarrow 00:52:07.524$ which we've been using quite a

NOTE Confidence: 0.882010495

 $00{:}52{:}07.524 \dashrightarrow 00{:}52{:}09.430$ lot through these pandemic times,

NOTE Confidence: 0.882010495

 $00:52:09.430 \longrightarrow 00:52:11.698$ and in many cases the evidence

NOTE Confidence: 0.882010495

 $00:52:11.698 \longrightarrow 00:52:13.970$ shows they're not inferior to PSG

NOTE Confidence: 0.882010495

 $00:52:13.970 \longrightarrow 00:52:16.040$ and can be more cost effective

NOTE Confidence: 0.882010495

 $00{:}52{:}16.040 \dashrightarrow 00{:}52{:}17.860$ and convenient for the patient.

NOTE Confidence: 0.882010495

 $00:52:17.860 \longrightarrow 00:52:20.844$ But we have to still have a PSG

NOTE Confidence: 0.882010495

 $00:52:20.844 \longrightarrow 00:52:23.312$ for patients not responding auto

NOTE Confidence: 0.882010495

 $00:52:23.312 \longrightarrow 00:52:25.964$ titrating modes again and not inferior,

 $00:52:25.970 \longrightarrow 00:52:27.518$ but really important.

NOTE Confidence: 0.882010495

 $00:52:27.518 \longrightarrow 00:52:29.058$ Mass edema, tations,

NOTE Confidence: 0.882010495

 $00:52:29.058 \longrightarrow 00:52:31.598$ and I think the importance.

NOTE Confidence: 0.882010495

 $00:52:31.600 \longrightarrow 00:52:32.015$ However,

NOTE Confidence: 0.882010495

 $00:52:32.015 \longrightarrow 00:52:34.090$ we approach these patients that

NOTE Confidence: 0.882010495

 $00{:}52{:}34.090 \dashrightarrow 00{:}52{:}36.207$ ongoing monitoring and that remote

NOTE Confidence: 0.882010495

00:52:36.207 --> 00:52:38.187 monitoring is really giving us

NOTE Confidence: 0.882010495

 $00{:}52{:}38.187 \dashrightarrow 00{:}52{:}40.205$ opening up part convenience for

NOTE Confidence: 0.882010495

00:52:40.205 --> 00:52:41.669 both past center patients.

NOTE Confidence: 0.882010495

 $00:52:41.670 \longrightarrow 00:52:44.158$ So I will stop there for any questions.

NOTE Confidence: 0.926613128

 $00:52:48.960 \longrightarrow 00:52:50.160$ Thank you so much Doctor.

NOTE Confidence: 0.926613128

 $00:52:50.160 \longrightarrow 00:52:51.504$ Pepper that was outstanding.

NOTE Confidence: 0.926613128

 $00{:}52{:}51.504 \dashrightarrow 00{:}52{:}53.312$ Really. A wonderful wonderful talk.

NOTE Confidence: 0.926613128

 $00:52:53.312 \dashrightarrow 00:52:56.159$ I think I I just learned so much.

NOTE Confidence: 0.926613128

00:52:56.160 --> 00:52:57.216 Every time you speak.

00:52:57.216 --> 00:53:00.570 So thank you. I I I'm struck by

NOTE Confidence: 0.926613128

 $00{:}53{:}00.570 \dashrightarrow 00{:}53{:}02.178$ several things that you said I,

NOTE Confidence: 0.926613128

 $00{:}53{:}02.180 \dashrightarrow 00{:}53{:}03.668$ I think people can get overwhelmed

NOTE Confidence: 0.926613128

 $00{:}53{:}03.668 \dashrightarrow 00{:}53{:}05.100$ sometimes with all the settings.

NOTE Confidence: 0.926613128

00:53:05.100 --> 00:53:07.017 And I love how you started out with saying,

NOTE Confidence: 0.926613128

 $00:53:07.020 \longrightarrow 00:53:08.434$ you know these are the goals that

NOTE Confidence: 0.926613128

 $00:53:08.434 \longrightarrow 00:53:10.022$ we're trying to achieve and I think

NOTE Confidence: 0.926613128

 $00:53:10.022 \longrightarrow 00:53:11.432$ that's important thing that we always

NOTE Confidence: 0.926613128

 $00:53:11.474 \longrightarrow 00:53:12.994$ try to bring home to our fellows too.

NOTE Confidence: 0.926613128

 $00:53:13.000 \longrightarrow 00:53:14.575$ It's like we want to improve oxygenation.

NOTE Confidence: 0.926613128

 $00:53:14.580 \longrightarrow 00:53:16.344$ We kind of want to improve ventilation.

NOTE Confidence: 0.926613128

 $00:53:16.350 \longrightarrow 00:53:18.030$ We want to improve hospitalizations,

NOTE Confidence: 0.926613128

 $00:53:18.030 \longrightarrow 00:53:18.347$ outcomes,

NOTE Confidence: 0.926613128

 $00:53:18.347 \longrightarrow 00:53:20.566$ outcomes that are important to the patient,

NOTE Confidence: 0.926613128

 $00:53:20.570 \longrightarrow 00:53:22.555$ and we're using these techniques

NOTE Confidence: 0.926613128

 $00:53:22.555 \longrightarrow 00:53:24.540$ in order to do that.

 $00:53:24.540 \longrightarrow 00:53:26.528$ So, so thank you for a really,

NOTE Confidence: 0.926613128

 $00:53:26.530 \longrightarrow 00:53:28.918$ really terrific talk.

NOTE Confidence: 0.926613128

 $00:53:28.920 \longrightarrow 00:53:29.934$ Just a question.

NOTE Confidence: 0.926613128

00:53:29.934 --> 00:53:30.610 You know.

NOTE Confidence: 0.926613128

 $00:53:30.610 \longrightarrow 00:53:32.410$ I had the same observation that with COVID,

NOTE Confidence: 0.926613128

 $00:53:32.410 \longrightarrow 00:53:33.910$ we've really gone outside the box.

NOTE Confidence: 0.926613128

 $00:53:33.910 \longrightarrow 00:53:35.526$ We used to do a lot more PSGS.

NOTE Confidence: 0.926613128

 $00:53:35.530 \longrightarrow 00:53:37.784$ We're doing less now in the US.

NOTE Confidence: 0.926613128

00:53:37.790 --> 00:53:39.614 We don't really get to bring them in,

NOTE Confidence: 0.926613128

 $00:53:39.620 \longrightarrow 00:53:40.420$ even for a day,

NOTE Confidence: 0.926613128

 $00:53:40.420 \longrightarrow 00:53:41.995$ so we use we relying on the

NOTE Confidence: 0.926613128

 $00:53:41.995 \longrightarrow 00:53:43.287$ durable medical equipment companies

NOTE Confidence: 0.926613128

 $00{:}53{:}43.287 \dashrightarrow 00{:}53{:}45.110$ to get our patients set up.

NOTE Confidence: 0.926613128

 $00:53:45.110 \longrightarrow 00:53:46.064$ And then we're doing a lot

NOTE Confidence: 0.926613128

 $00:53:46.064 \longrightarrow 00:53:46.970$ of the back and forth.

 $00:53:46.970 \longrightarrow 00:53:47.918$ Monitoring as well,

NOTE Confidence: 0.926613128

 $00{:}53{:}47.918 \dashrightarrow 00{:}53{:}50.571$ but I think your point of the title

NOTE Confidence: 0.926613128

 $00:53:50.571 \longrightarrow 00:53:52.411$ volume is is really important

NOTE Confidence: 0.926613128

00:53:52.411 --> 00:53:54.730 when we're looking at the numbers.

NOTE Confidence: 0.926613128

00:53:54.730 --> 00:53:55.972 I think sometimes people get focused

NOTE Confidence: 0.926613128

 $00:53:55.972 \longrightarrow 00:53:57.630$ on the number is the title volume OK?

NOTE Confidence: 0.926613128

 $00:53:57.630 \longrightarrow 00:53:59.331$ And at the end of the day that may

NOTE Confidence: 0.926613128

 $00{:}53{:}59.331 \dashrightarrow 00{:}54{:}00.872$ not even be accurate if there's

NOTE Confidence: 0.926613128

 $00:54:00.872 \longrightarrow 00:54:02.783$ high leak and and that's a really

NOTE Confidence: 0.926613128

00:54:02.783 --> 00:54:04.463 important point that you brought up.

NOTE Confidence: 0.926613128

 $00{:}54{:}04.470 \dashrightarrow 00{:}54{:}06.828$ I do want to open it up to questions

NOTE Confidence: 0.926613128

 $00{:}54{:}06.828 \to 00{:}54{:}09.384$ I'm I'm just want to take a look here.

NOTE Confidence: 0.926613128

 $00:54:09.390 \longrightarrow 00:54:11.298$ There's one question so far from

NOTE Confidence: 0.926613128

 $00:54:11.298 \longrightarrow 00:54:12.810$ the audience and one is.

NOTE Confidence: 0.926613128

 $00:54:12.810 \longrightarrow 00:54:15.876$ Thank you for a wonderful talk.

NOTE Confidence: 0.926613128

 $00{:}54{:}15.880 \dashrightarrow 00{:}54{:}17.760$ It's an example of a seal PD patient

 $00:54:17.760 \longrightarrow 00:54:19.180$ using their respironics breath by

NOTE Confidence: 0.926613128

 $00{:}54{:}19.180 \dashrightarrow 00{:}54{:}20.974$ breath data to your knowledge is

NOTE Confidence: 0.926613128

 $00{:}54{:}20.974 \dashrightarrow 00{:}54{:}22.452$ breath by breath data available

NOTE Confidence: 0.926613128

00:54:22.452 --> 00:54:23.580 from Res Med devices,

NOTE Confidence: 0.926613128

 $00:54:23.580 \longrightarrow 00:54:25.326$ especially on the cloud or airview.

NOTE Confidence: 0.886379916666667

 $00:54:27.000 \longrightarrow 00:54:29.268$ So unfortunately the answer is no.

NOTE Confidence: 0.886379916666667

00:54:29.270 --> 00:54:31.174 So the advantage of the Phillips is you

NOTE Confidence: 0.886379916666667

 $00:54:31.174 \longrightarrow 00:54:33.216$ can get some limited breath by breath,

NOTE Confidence: 0.886379916666667

 $00{:}54{:}33.220 \dashrightarrow 00{:}54{:}35.983$ but with the simple devices and.

NOTE Confidence: 0.886379916666667

 $00{:}54{:}35.983 \dashrightarrow 00{:}54{:}38.967$ You can't do that with the res Med,

NOTE Confidence: 0.886379916666667

 $00:54:38.970 \longrightarrow 00:54:40.242$ but we just get the patience

NOTE Confidence: 0.886379916666667

 $00:54:40.242 \longrightarrow 00:54:41.390$ or post in the card.

NOTE Confidence: 0.886379916666667

 $00:54:41.390 \longrightarrow 00:54:43.595$ And in fact the the information on the cards,

NOTE Confidence: 0.886379916666667

 $00:54:43.600 \longrightarrow 00:54:46.346$ the last five or six days is

NOTE Confidence: 0.886379916666667

 $00:54:46.346 \longrightarrow 00:54:48.276$ actually superior to what you

 $00:54:48.276 \longrightarrow 00:54:50.814$ get on the on care orchestrator,

NOTE Confidence: 0.886379916666667

 $00:54:50.814 \longrightarrow 00:54:54.020$ because you can actually blow it up.

NOTE Confidence: 0.886379916666667

 $00:54:54.020 \longrightarrow 00:54:56.092$ You know you can look at it

NOTE Confidence: 0.886379916666667

00:54:56.092 --> 00:54:58.300 one one minute 32nd, 5 minute,

NOTE Confidence: 0.886379916666667

 $00:54:58.300 \longrightarrow 00:55:00.940$ so there's a lot more flexibility

NOTE Confidence: 0.886379916666667

 $00:55:00.940 \longrightarrow 00:55:03.128$ and and a lot more data.

NOTE Confidence: 0.886379916666667

 $00{:}55{:}03.130 \dashrightarrow 00{:}55{:}04.965$ Much more richer data with

NOTE Confidence: 0.886379916666667

 $00:55:04.965 \longrightarrow 00:55:06.372$ the reasoning device, but.

NOTE Confidence: 0.886379916666667

 $00:55:06.372 \longrightarrow 00:55:08.184$ It is on the card only,

NOTE Confidence: 0.886379916666667

 $00:55:08.190 \longrightarrow 00:55:10.170$ whereas with the Phillips device,

NOTE Confidence: 0.886379916666667

 $00:55:10.170 \longrightarrow 00:55:12.573$ once you get on the card and what you

NOTE Confidence: 0.886379916666667

00:55:12.573 --> 00:55:15.114 get on the cloud is about the same so.

NOTE Confidence: 0.886379916666667

 $00:55:15.120 \longrightarrow 00:55:16.360$ It's a lot more limited,

NOTE Confidence: 0.886379916666667

 $00{:}55{:}16.360 \to 00{:}55{:}18.677$ but it's there a lot more frequently,

NOTE Confidence: 0.886379916666667

 $00:55:18.680 \longrightarrow 00:55:22.106$ so convenience versus depth of information.

NOTE Confidence: 0.881773154

00:55:23.840 --> 00:55:25.620 City, thank you. Thank you.

 $00{:}55{:}25.620 {\:{\mbox{--}}\!\!>}\ 00{:}55{:}27.320$ Other questions. People can feel

NOTE Confidence: 0.881773154

 $00{:}55{:}27.320 \dashrightarrow 00{:}55{:}29.619$ free to either type into the chat.

NOTE Confidence: 0.881773154

 $00:55:29.620 \longrightarrow 00:55:31.260$ I'll be happy to read or if you want to

NOTE Confidence: 0.881773154

00:55:31.302 --> 00:55:32.988 unmute yourself you should have that

NOTE Confidence: 0.881773154

 $00:55:32.988 \longrightarrow 00:55:34.386$ capability to unmute yourself. Now.

NOTE Confidence: 0.881773154

 $00:55:34.386 \longrightarrow 00:55:36.950$ If you have a question that you want to ask.

NOTE Confidence: 0.80218683375

 $00:55:40.700 \longrightarrow 00:55:43.031$ Maybe what people are doing that I think that

NOTE Confidence: 0.80218683375

 $00:55:43.031 \longrightarrow 00:55:45.410$ you know when we're sitting these settings,

NOTE Confidence: 0.80218683375

 $00:55:45.410 \longrightarrow 00:55:47.414$ different people can approach the setting

NOTE Confidence: 0.80218683375

 $00:55:47.414 \longrightarrow 00:55:49.436$ of these patients in slightly different

NOTE Confidence: 0.80218683375

 $00:55:49.436 \longrightarrow 00:55:51.940$ ways and still get the same end result.

NOTE Confidence: 0.80218683375

 $00:55:51.940 \longrightarrow 00:55:53.347$ But you know what are the goals,

NOTE Confidence: 0.80218683375

 $00{:}55{:}53.350 \rightarrow 00{:}55{:}55.065$ not just what we're trying to achieve?

NOTE Confidence: 0.80218683375

 $00:55:55.070 \longrightarrow 00:55:57.261$ We're always trying to achieve that drop

NOTE Confidence: 0.80218683375

 $00:55:57.261 \longrightarrow 00:55:59.277$ in carbon dioxide patients may have

 $00:55:59.277 \longrightarrow 00:56:01.323$ slightly different goals to our clinic.

NOTE Confidence: 0.80218683375

 $00:56:01.330 \longrightarrow 00:56:02.725$ What we clinically,

NOTE Confidence: 0.80218683375

00:56:02.725 --> 00:56:04.585 objectively want to have,

NOTE Confidence: 0.80218683375

 $00:56:04.590 \longrightarrow 00:56:07.369$ and I think there's a good paper

NOTE Confidence: 0.80218683375

 $00:56:07.369 \longrightarrow 00:56:09.838$ by Patel in thorax looking at.

NOTE Confidence: 0.80218683375

 $00.56:09.838 \longrightarrow 00.56:12.340$ Difference in settings between a large

NOTE Confidence: 0.80218683375

 $00:56:12.409 \longrightarrow 00:56:15.048$ French group and a large English group

NOTE Confidence: 0.80218683375

 $00:56:15.050 \longrightarrow 00:56:17.500$ and basically the patient survival.

NOTE Confidence: 0.80218683375

 $00:56:17.500 \longrightarrow 00:56:19.532$ There wasn't any difference in a whole lot

NOTE Confidence: 0.80218683375

 $00:56:19.532 \longrightarrow 00:56:21.360$ of parameters even though they approached.

NOTE Confidence: 0.80218683375

00:56:21.360 --> 00:56:23.908 I think the French group had slightly

NOTE Confidence: 0.80218683375

 $00:56:23.908 \longrightarrow 00:56:26.139$ lower pressures than the English group

NOTE Confidence: 0.80218683375

00:56:26.140 --> 00:56:29.290 and slightly higher respiratory rates,

NOTE Confidence: 0.80218683375

 $00:56:29.290 \longrightarrow 00:56:32.186$ but the final outcomes exactly the same.

NOTE Confidence: 0.80218683375

00:56:32.190 --> 00:56:34.000 So two different clinicians may

NOTE Confidence: 0.80218683375

 $00:56:34.000 \longrightarrow 00:56:35.448$ do things slightly differently,

 $00:56:35.450 \longrightarrow 00:56:37.358$ but with that monitoring it comes

NOTE Confidence: 0.80218683375

00:56:37.358 --> 00:56:39.879 down our two with how we're doing it.

NOTE Confidence: 0.80218683375

 $00:56:39.880 \longrightarrow 00:56:41.428$ Is it effective for the patient?

NOTE Confidence: 0.869435280714286

00:56:43.560 --> 00:56:46.392 What percent of your patients do you think

NOTE Confidence: 0.869435280714286

00:56:46.392 --> 00:56:48.667 you're currently doing Poly sonography on?

NOTE Confidence: 0.869435280714286

00:56:48.670 --> 00:56:50.056 You know who these difficult patients?

NOTE Confidence: 0.869435280714286

00:56:50.060 --> 00:56:51.614 And would you? And do you think

NOTE Confidence: 0.869435280714286

 $00:56:51.614 \longrightarrow 00:56:52.878$ there's a difference between the

NOTE Confidence: 0.869435280714286

 $00:56:52.878 \longrightarrow 00:56:54.570$ neuromuscular group and the COPD group?

NOTE Confidence: 0.764393083703704

 $00:56:55.210 \longrightarrow 00:56:57.737$ OK, so we've probably had we still

NOTE Confidence: 0.764393083703704

00:56:57.737 --> 00:57:00.458 get because of our and then again

NOTE Confidence: 0.764393083703704

 $00:57:00.458 \longrightarrow 00:57:02.798$ because of the tyranny of distance

NOTE Confidence: 0.764393083703704

 $00:57:02.880 \dashrightarrow 00:57:05.239$ some of the patients are who we,

NOTE Confidence: 0.764393083703704

 $00:57:05.240 \longrightarrow 00:57:07.440$ if they were living in Sydney we would

NOTE Confidence: 0.764393083703704

 $00:57:07.440 \longrightarrow 00:57:09.865$ see them just coming in as our patients.

 $00:57:09.870 \longrightarrow 00:57:11.590$ They have just traveled five

NOTE Confidence: 0.764393083703704

 $00:57:11.590 \longrightarrow 00:57:14.094$ hours so we're going to be doing

NOTE Confidence: 0.764393083703704

 $00:57:14.094 \longrightarrow 00:57:15.889$ them in the sleep laboratory.

NOTE Confidence: 0.764393083703704

 $00:57:15.890 \longrightarrow 00:57:19.117$ I would say that probably the Group

NOTE Confidence: 0.764393083703704

 $00:57:19.117 \longrightarrow 00:57:21.370$ of neuromuscular patients we bring

NOTE Confidence: 0.764393083703704

 $00:57:21.370 \longrightarrow 00:57:24.121$ into the into the lab most frequently

NOTE Confidence: 0.764393083703704

 $00:57:24.121 \dashrightarrow 00:57:27.045$ would be our many of our MMD pay a LS

NOTE Confidence: 0.764393083703704

00:57:27.045 --> 00:57:29.170 patience with the tricky upper Airways

NOTE Confidence: 0.764393083703704

00:57:29.170 --> 00:57:31.570 that no matter what we're doing,

NOTE Confidence: 0.764393083703704

 $00:57:31.570 \longrightarrow 00:57:32.762$ they still got up.

NOTE Confidence: 0.764393083703704

 $00{:}57{:}32.762 \dashrightarrow 00{:}57{:}34.919$ It why obstruction and trying to make

NOTE Confidence: 0.764393083703704

 $00:57:34.919 \longrightarrow 00:57:37.047$ sure it's not us or something about

NOTE Confidence: 0.764393083703704

00:57:37.047 --> 00:57:38.919 the machine that you know for some

NOTE Confidence: 0.764393083703704

 $00:57:38.919 \longrightarrow 00:57:40.604$ of them it is just hyper reflexive

NOTE Confidence: 0.764393083703704

 $00:57:40.604 \longrightarrow 00:57:42.056$ they had in the upper airway.

NOTE Confidence: 0.764393083703704

 $00:57:42.060 \longrightarrow 00:57:42.920$ No matter what you do,

 $00:57:42.920 \longrightarrow 00:57:44.045$ they're still going to have

NOTE Confidence: 0.764393083703704

 $00:57:44.045 \longrightarrow 00:57:44.720$ upper airway obstruction.

NOTE Confidence: 0.764393083703704

 $00:57:44.720 \longrightarrow 00:57:46.322$ But to give them the best

NOTE Confidence: 0.764393083703704

00:57:46.322 --> 00:57:47.773 possible outcome we will bring

NOTE Confidence: 0.764393083703704

 $00:57:47.773 \longrightarrow 00:57:49.418$ them into the sleep laboratory.

NOTE Confidence: 0.764393083703704

00:57:49.420 --> 00:57:51.280 But I would say probably only

NOTE Confidence: 0.764393083703704

 $00:57:51.280 \longrightarrow 00:57:52.889$ about 20 banknotes hard because

NOTE Confidence: 0.764393083703704

 $00:57:52.889 \longrightarrow 00:57:54.695$ of the last couple of years.

NOTE Confidence: 0.764393083703704

00:57:54.700 --> 00:57:56.866 We haven't had the sleep laboratory

NOTE Confidence: 0.764393083703704

 $00:57:56.866 \longrightarrow 00:57:58.940$ there closed down one at a time,

NOTE Confidence: 0.764393083703704

 $00:57:58.940 \longrightarrow 00:58:01.550$ but probably about.

NOTE Confidence: 0.764393083703704

 $00:58:01.550 \longrightarrow 00:58:03.894$ 20% of our patients are coming in or

NOTE Confidence: 0.764393083703704

 $00{:}58{:}03.894 \dashrightarrow 00{:}58{:}07.454$ 30% a lot of them are being set up.

NOTE Confidence: 0.764393083703704

00:58:07.460 --> 00:58:10.202 But back home or just coming

NOTE Confidence: 0.764393083703704

 $00:58:10.202 \longrightarrow 00:58:12.030$ into house that day.

00:58:12.030 --> 00:58:14.558 And metric here models of in Ivy City.

NOTE Confidence: 0.875010844285714

 $00{:}58{:}15.310 --> 00{:}58{:}16.153$ Great, thank you.

NOTE Confidence: 0.875010844285714

 $00:58:16.153 \longrightarrow 00:58:17.277$ Let's see another question,

NOTE Confidence: 0.875010844285714

 $00:58:17.280 \longrightarrow 00:58:18.336$ another excellent talk.

NOTE Confidence: 0.875010844285714

 $00:58:18.336 \longrightarrow 00:58:20.606$ Thank you so much with the

NOTE Confidence: 0.875010844285714

 $00:58:20.606 \longrightarrow 00:58:22.318$ auto adjusting ipat modes.

NOTE Confidence: 0.875010844285714

 $00:58:22.320 \longrightarrow 00:58:24.516$ Can we use it in patients

NOTE Confidence: 0.875010844285714

 $00:58:24.516 \longrightarrow 00:58:25.248$ with hypoventilation?

NOTE Confidence: 0.875010844285714

 $00:58:25.250 \longrightarrow 00:58:27.986$ Given concern of variable title volume

NOTE Confidence: 0.860696094

 $00:58:28.930 \longrightarrow 00:58:30.115$ and the answer is yes

NOTE Confidence: 0.860696094

 $00:58:30.115 \longrightarrow 00:58:31.300$ and that's why I always.

NOTE Confidence: 0.860696094

 $00:58:31.300 \longrightarrow 00:58:33.684$ I tend to start in a fixed pressure

NOTE Confidence: 0.860696094

00:58:33.684 --> 00:58:36.538 and then by a remotely I can see if

NOTE Confidence: 0.860696094

00:58:36.538 --> 00:58:38.899 they're not leaking then I'm very happy.

NOTE Confidence: 0.860696094

00:58:38.900 --> 00:58:41.378 And because remotely logging machines you

NOTE Confidence: 0.860696094

00:58:41.378 --> 00:58:43.848 can actually change from fixed to to,

 $00:58:43.850 \longrightarrow 00:58:45.530$ you know like the the.

NOTE Confidence: 0.860696094

00:58:45.530 --> 00:58:48.056 IE mode or something like that.

NOTE Confidence: 0.860696094

 $00:58:48.060 \longrightarrow 00:58:50.076$ Oh so the IE mode so you're just you're

NOTE Confidence: 0.860696094

 $00:58:50.076 \longrightarrow 00:58:52.028$ not talking about the volume target,

NOTE Confidence: 0.860696094

 $00{:}58{:}52.030 \rightarrow 00{:}58{:}53.915$ you're just talking about the

NOTE Confidence: 0.860696094

 $00:58:53.915 \longrightarrow 00:58:55.423$ at the epac itself.

NOTE Confidence: 0.860696094

00:58:55.430 --> 00:58:56.566 Auto epub itself, yes,

NOTE Confidence: 0.860696094

 $00:58:56.566 \longrightarrow 00:58:59.070$ and we will often if a patient is

NOTE Confidence: 0.860696094

 $00:58:59.070 \longrightarrow 00:59:01.632$ leaking a lot rather than using volume

NOTE Confidence: 0.860696094

 $00:59:01.632 \dashrightarrow 00:59:03.583$ targeted pressure support with AE

NOTE Confidence: 0.860696094

 $00:59:03.583 \longrightarrow 00:59:05.857$ will use fixed pressure support and

NOTE Confidence: 0.860696094

 $00{:}59{:}05.860 \dashrightarrow 00{:}59{:}11.088$ then use the the the auto E Pebble

NOTE Confidence: 0.860696094

 $00{:}59{:}11.088 \dashrightarrow 00{:}59{:}14.066$ am with them making a little bit

NOTE Confidence: 0.860696094

 $00:59:14.066 \longrightarrow 00:59:15.880$ hard at the moment because of other.

NOTE Confidence: 0.860696094

 $00:59:15.880 \longrightarrow 00:59:17.338$ Things that are happening with FDA

00:59:17.338 --> 00:59:19.488 with one of the devices that does that,

NOTE Confidence: 0.860696094

 $00:59:19.490 \longrightarrow 00:59:21.380$ but the device that did do that,

NOTE Confidence: 0.860696094

 $00{:}59{:}21.380 \dashrightarrow 00{:}59{:}25.292$ we would often use fixed pressure

NOTE Confidence: 0.860696094

 $00:59:25.292 \longrightarrow 00:59:27.900$ support with a variable.

NOTE Confidence: 0.860696094

 $00:59:27.900 \longrightarrow 00:59:30.217$ The the problem with the Rays Med

NOTE Confidence: 0.860696094

00:59:30.217 --> 00:59:31.535 devices that patients leaking

NOTE Confidence: 0.860696094

 $00:59:31.535 \longrightarrow 00:59:33.327$ a lot and you want the AE.

NOTE Confidence: 0.860696094

 $00{:}59{:}33.330 \dashrightarrow 00{:}59{:}35.282$ You also have to use the the IBEX

NOTE Confidence: 0.860696094

 $00{:}59{:}35.282 \dashrightarrow 00{:}59{:}37.698$ mode as well and then you've got to

NOTE Confidence: 0.860696094

00:59:37.698 --> 00:59:39.780 think about what they're leaking alot.

NOTE Confidence: 0.860696094

 $00:59:39.780 \longrightarrow 00:59:41.138$ What will I that's you know what

NOTE Confidence: 0.860696094

00:59:41.138 --> 00:59:43.017 will be I that's due in terms of the

NOTE Confidence: 0.860696094

 $00{:}59{:}43.017 \dashrightarrow 00{:}59{:}44.658$ tidal volume so it becomes a little

NOTE Confidence: 0.860696094

00:59:44.658 --> 00:59:46.182 bit trickier when would stuck now

NOTE Confidence: 0.860696094

 $00:59:46.182 \longrightarrow 00:59:48.864$ with only one one device that we

NOTE Confidence: 0.860696094

 $00:59:48.864 \longrightarrow 00:59:51.782$ have access to that can do that can

 $00:59:51.782 \longrightarrow 00:59:55.299$ do 5X and the AE or a vexing the AE.

NOTE Confidence: 0.923526786

 $00{:}59{:}56.210 \longrightarrow 00{:}59{:}58.020$ Terrific thank you. How often?

NOTE Confidence: 0.923526786

00:59:58.020 --> 00:59:59.586 You know it's you know it's

NOTE Confidence: 0.923526786

00:59:59.586 --> 01:00:00.864 obviously in, you know,

NOTE Confidence: 0.923526786

01:00:00.864 --> 01:00:03.126 using the the inspiratory time well,

NOTE Confidence: 0.923526786

01:00:03.130 --> 01:00:04.906 you know with Bilevel St you

NOTE Confidence: 0.923526786

 $01:00:04.906 \longrightarrow 01:00:06.699$ know can really help you know.

NOTE Confidence: 0.923526786

 $01:00:06.700 \longrightarrow 01:00:08.188$ Improve title volume with

NOTE Confidence: 0.923526786

01:00:08.188 --> 01:00:09.304 these neuromuscular patients,

NOTE Confidence: 0.923526786

 $01:00:09.310 \longrightarrow 01:00:11.070$ how often do you wind up switching these

NOTE Confidence: 0.923526786

01:00:11.070 --> 01:00:12.370 patients over to pressure control?

NOTE Confidence: 0.857128645

 $01:00:13.990 \longrightarrow 01:00:18.732$ We we probably would have about maybe

NOTE Confidence: 0.857128645

01:00:18.732 --> 01:00:20.904 15% of our patients in pressure

NOTE Confidence: 0.857128645

 $01:00:20.904 \longrightarrow 01:00:22.975$ control and they generally are

NOTE Confidence: 0.857128645

 $01:00:22.975 \longrightarrow 01:00:24.799$ patients with neuromuscular problems

01:00:24.799 --> 01:00:27.094 and who got leak. For instance,

NOTE Confidence: 0.857128645

 $01:00:27.094 \longrightarrow 01:00:28.718$ you know where leak is a problem,

NOTE Confidence: 0.857128645

 $01:00:28.720 \longrightarrow 01:00:30.460$ so that seems to work better

NOTE Confidence: 0.857128645

 $01:00:30.460 \longrightarrow 01:00:32.210$ and you're a muscular patients.

NOTE Confidence: 0.857128645

01:00:32.210 --> 01:00:34.030 And once you get the settings right,

NOTE Confidence: 0.857128645

01:00:34.030 --> 01:00:35.390 they'll go along with anything.

NOTE Confidence: 0.857128645

 $01:00:35.390 \longrightarrow 01:00:36.491$ So they're very,

NOTE Confidence: 0.857128645

 $01:00:36.491 \longrightarrow 01:00:38.693$ very comfortable in pressure control mode.

NOTE Confidence: 0.857128645

 $01:00:38.700 \longrightarrow 01:00:41.382$ Sometimes the way we set it up the the

NOTE Confidence: 0.857128645

 $01:00:41.382 \longrightarrow 01:00:43.704$ settings for the iPad mini and iPad Max.

NOTE Confidence: 0.857128645

 $01:00:43.710 \longrightarrow 01:00:45.579$ Are so close together they may as

NOTE Confidence: 0.857128645

01:00:45.579 --> 01:00:47.788 well be in pressure control mode,

NOTE Confidence: 0.857128645

 $01:00:47.790 \longrightarrow 01:00:49.670$ but we give them a little bit of

NOTE Confidence: 0.857128645

 $01{:}00{:}49.670 \dashrightarrow 01{:}00{:}51.589$ wiggle room if they just like to

NOTE Confidence: 0.857128645

 $01:00:51.589 \longrightarrow 01:00:52.979$ have a slightly they're feeling

NOTE Confidence: 0.857128645

 $01:00:53.037 \longrightarrow 01:00:54.641$ like machines imposing something

 $01:00:54.641 \longrightarrow 01:00:56.245$ on them during wakefulness.

NOTE Confidence: 0.857128645

 $01:00:56.250 \longrightarrow 01:00:58.070$ But a lot of neuromuscular

NOTE Confidence: 0.857128645

 $01:00:58.070 \longrightarrow 01:01:00.399$ patients where we use it a lot.

NOTE Confidence: 0.857128645

 $01:01:00.400 \longrightarrow 01:01:02.168$ They tend to go along with it and

NOTE Confidence: 0.857128645

01:01:02.168 --> 01:01:03.886 they find it actually quite quite

NOTE Confidence: 0.857128645

 $01:01:03.886 \longrightarrow 01:01:06.024$ comfortable and they like that idea of

NOTE Confidence: 0.857128645

 $01:01:06.024 \longrightarrow 01:01:07.830$ being being pushed out and expand it.

NOTE Confidence: 0.857128645

01:01:07.830 --> 01:01:08.610 They'll say, oh,

NOTE Confidence: 0.857128645

 $01:01:08.610 \longrightarrow 01:01:10.170$ I can actually feel the air

NOTE Confidence: 0.857128645

 $01:01:10.170 \longrightarrow 01:01:11.030$ getting down there.

NOTE Confidence: 0.857128645

 $01:01:11.030 \longrightarrow 01:01:12.446$ Gonna be careful they might actually

NOTE Confidence: 0.857128645

 $01:01:12.446 \longrightarrow 01:01:14.017$ be sore for the first couple

NOTE Confidence: 0.857128645

 $01{:}01{:}14.017 \dashrightarrow 01{:}01{:}15.447$ of days because they're moving.

NOTE Confidence: 0.857128645

 $01:01:15.450 \longrightarrow 01:01:17.382$ Maybe some ribs and some joints

NOTE Confidence: 0.857128645

01:01:17.382 --> 01:01:19.448 they haven't moved for a long time,

 $01:01:19.450 \longrightarrow 01:01:21.028$ but it can often be very,

NOTE Confidence: 0.857128645

 $01:01:21.030 \longrightarrow 01:01:23.130$ very effective and very comfortable for them.

NOTE Confidence: 0.857128645

 $01:01:23.130 \longrightarrow 01:01:25.181$ And again by remote monitoring like we

NOTE Confidence: 0.857128645

 $01:01:25.181 \longrightarrow 01:01:27.700$ could go home and gradually increase that.

NOTE Confidence: 0.857128645

01:01:27.700 --> 01:01:28.984 And to a point where they

NOTE Confidence: 0.857128645

 $01:01:28.984 \longrightarrow 01:01:30.200$ no longer saw in there.

NOTE Confidence: 0.857128645

 $01{:}01{:}30.200 \dashrightarrow 01{:}01{:}32.016$ You might be getting a decent size spread.

NOTE Confidence: 0.791443554

01:01:32.630 --> 01:01:33.894 Terrific, well thank you.

NOTE Confidence: 0.791443554

 $01:01:33.894 \longrightarrow 01:01:35.680$ Well, we're at time so otherwise we

NOTE Confidence: 0.791443554

01:01:35.680 --> 01:01:37.580 would keep asking you questions I think,

NOTE Confidence: 0.791443554

01:01:37.580 --> 01:01:39.078 but it's really been such a pleasure

NOTE Confidence: 0.791443554

01:01:39.078 --> 01:01:40.929 is really a pleasure to have you here.

NOTE Confidence: 0.791443554

 $01:01:40.930 \longrightarrow 01:01:42.820$ Thank you so much for joining us.

NOTE Confidence: 0.850592329166666

01:01:43.370 --> 01:01:44.354 Well it was delightful.

NOTE Confidence: 0.850592329166666

01:01:44.354 --> 01:01:45.830 Thank you so much for asking

NOTE Confidence: 0.850592329166666

01:01:45.884 --> 01:01:47.312 me and it's a pity I can't

 $01:01:47.312 \longrightarrow 01:01:48.727$ actually see you in in real life.

NOTE Confidence: 0.850592329166666

 $01:01:48.730 \longrightarrow 01:01:53.110$ But hopefully ATS might be on.

NOTE Confidence: 0.850592329166666

01:01:53.110 --> 01:01:54.094 Barring Omicron,

NOTE Confidence: 0.850592329166666

 $01:01:54.094 \longrightarrow 01:01:56.554$ so we'll see what happens.

NOTE Confidence: 0.850592329166666 01:01:56.560 --> 01:01:57.530 OK, really?

NOTE Confidence: 0.84600163

01:01:57.540 --> 01:01:58.800 So thank you. Thank you so much.

NOTE Confidence: 0.84600163

 $01:01:58.800 \longrightarrow 01:02:01.024$ Enjoy your day. Bye bye everyone bye

NOTE Confidence: 0.87854743 $01:02:02.240 \longrightarrow 01:02:02.690$ bye.

NOTE Confidence: 0.6174963

 $01:02:05.120 \longrightarrow 01:02:05.420$ Please.