News Release

FOR IMMEDIATE RELEASE

Contact:
Greta Drentlaw
Manager, Marketing Communications
651-348-3823
gdrentlaw@respirtech.com

RespirTech Develops Novel Remote Monitoring System for Cystic Fibrosis Patients as Part of NIH Grant

St. Paul, Minn. — March 14, 2016 — RespirTech, the nation's fastest growing provider of Airway Clearance Therapy (ACT) vests, is introducing a novel way to remotely monitor the treatment of cystic fibrosis (CF) patients as part of a project funded by a Small Business Innovation Research (SBIR) grant from the National Institutes of Health. SBIR grants provide early stage capital for research that has a strong potential for commercialization.

For the first time, two key diagnostic and treatment tools used in CF management—spirometry and high-frequency chest compression (HFCC)—will be available in a coordinated system that wirelessly transmits therapy data to a smartphone. The information is then shared with healthcare providers via a web-based app, allowing them to obtain a more complete, accurate picture of a patient's status. Spirometers measure lung function. HFCC systems—in this case, the inCourage® System from RespirTech—help clear patients' airways of excess mucus.

"By monitoring patients' lung function and therapy adherence at home, clinicians can optimize patient care," says K. James Ehlen, MD, CEO of RespirTech. "A primary goal of this initiative is to use ongoing data to detect and address pulmonary issues before they require more serious and costly interventions."

With the innovative home monitoring system, clinicians will use current data to quickly identify and respond to changes in a patient's pulmonary function. They can then adjust the prescribed HFCC regimen and lung function monitoring based on a patient's specific needs. Remote monitoring may be particularly useful for patients living in areas with limited access to CF specialists.

- More -

HFCC is a standard airway clearance intervention. For Americans with cystic fibrosis, more than 70 percent of adults and nearly 90 percent of children ages 6-17 use HFCC vest therapy. More than 95 percent of the nation's 110 Cystic Fibrosis Foundation-accredited CF care centers prescribe HFCC for their patients.

Other project collaborators include leading pulmonary researchers affiliated with two major U.S. academic medical centers and Health Factors, Inc., a Minneapolis company creating and implementing the connected-device strategy.

"From a patient perspective, there will now be a level of support that didn't exist before," says Dan Spors, Health Factors co-founder. "The patient does the same therapy, but the care staff will have new information and greater visibility into what the patient is doing. They will be able to correlate symptoms and objective device information, providing better context for making decisions."

RespirTech has agreed to license resulting technologies from Koronis Biomedical Technologies, the grant applicant and an R & D firm in Maple Grove, Minn.

"We look forward to applying these technologies for patients with CF and other chronic airway conditions like COPD and bronchiectasis. Measures that lead to better therapy adherence and more robust treatment information can contribute to better outcomes," says Ehlen. Research shows that patients who adhere to therapy may experience fewer respiratory infections[1] and a reduced need for antibiotics.[2] "Improved outcomes are good for patients, their caregivers and the health care system."

About RespirTech
RespirTech is the developer, manufacturer and distributor of the inCourage® System, which is designed for simple, effective airway clearance therapy (ACT) for a wide range of chronic lung conditions including cystic fibrosis, chronic obstructive pulmonary disease (COPD), and bronchiectasis, an often under-diagnosed condition[3] affecting an estimated 475,000 people in the U.S.[4] RespirTech is the only ACT vest company to use "triangle wave" air pulses, demonstrated to improve airway secretion clearance by as much as 20 percent over "sine wave" vest therapy systems.[5]

1-5. References available upon request.

###