



# Interpreting FeNO Readings<sup>1</sup> using NObreath<sup>®</sup> FeNO device

## ATS/ERS Clinical Guidelines Summary For Interpreting FeNO levels

Measuring airway inflammation with NObreath<sup>®</sup> can help monitor the effectiveness of medication and can be used to predict the risk of Asthma attacks<sup>1\*</sup>.

### Aid in diagnosis using the NObreath<sup>®</sup> FeNO device

FeNO (ppb) Levels	LOW <25ppb (<20ppb in children)	INTERMEDIATE 25-50ppb (20-35ppb in children)	HIGH >50ppb (>35ppb in children) or rise in FeNO of >40% from previously stable levels
<b>Symptomatic</b> (chronic cough and/or wheeze and/or shortness of breath during past 6 wk)	Eosinophilic airway inflammation unlikely  Alternative diagnosis  Unlikely to benefit from ICS	Be cautious  Evaluate clinical context  Monitor change in FeNO over time	Eosinophilic airway inflammation present  Likely to benefit from ICS

### Alternative considerations (if Allergic Asthma has been dismissed)<sup>2</sup>

- Non-Allergic Asthma
- Chronic cough
- Vocal Cord Dysfunction
- GERD

### Monitoring (in patients with diagnosed asthma) using the NObreath<sup>®</sup> FeNO device

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<b>Symptomatic</b> (chronic cough and/or wheeze and/or shortness of breath during past 6 wk)	Possible alternative diagnosis.  Unlikely to benefit from increase in ICS	Persistent allergen exposure  Inadequate ICS dose  Poor adherence  Steroid resistance	Persistent allergen exposure  Poor adherence or inhaler technique  Inadequate ICS dose  Risk of Exacerbation
<b>Symptoms Absent</b>	Adequate ICS dose  Good adherence  ICS taper	Adequate ICS dosing  Good adherence  Monitor Change in FeNO	Steroid resistance  ICS withdrawal or dose reduction may result in relapse

# Treatment Planning

FeNO testing with the NObreath® couldn't be easier:

## Test, Treat, Repeat™



Regular FeNO measurements indicate levels of airway inflammation, which can help Healthcare Professionals personalise treatment plans for patients, by helping titrate ICS dosing and evaluate patient adherence to treatment.

[www.nobreath.co.uk](http://www.nobreath.co.uk)

#### References:

1. J. Saito et al, European Respiratory Journal; Domiciliary diurnal variation of fractional exhaled nitric oxide for asthma control. August 15 2013, v.43, iss.4, pp 474-484.
2. R Dweik et al, Respiratory and Critical Care Medicine; An Official ATS Clinical Practice Guideline: Interpretation of Exhaled Nitric Oxide Levels (FENO) for Clinical Applications. September 1 2011, v.184, iss.5, pp 602-615.
3. Kharitonov S, Robbins R, Yates D, Keatings V, Barnes P. Acute and chronic effects of cigarette smoking on exhaled nitric oxide. American Journal of Respiratory and Critical Care Medicine. 1995;152(2):609-612.

\*FeNO is not a definitive indication of asthma and should be used in conjunction with (but not limited to) spirometry, patient history, symptoms.

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