

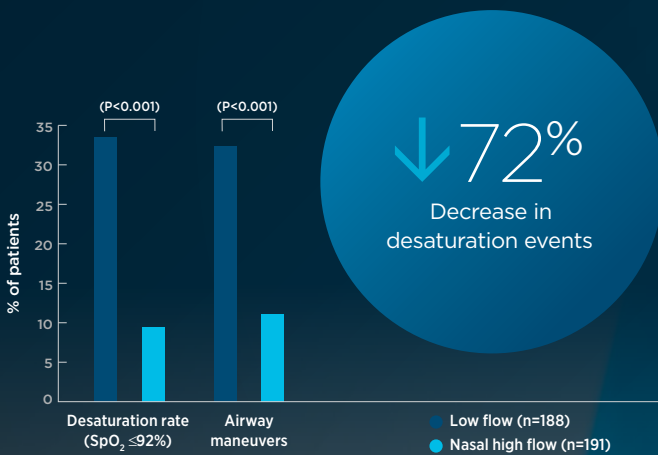
# Optimize oxygenation<sup>1-3</sup> and reduce the risk of procedural interruptions in GI endoscopy<sup>4</sup>

During GI endoscopy, it is preferable if your patient is sedated and still, however spontaneous breathing can sometimes be impaired due to the agents used for sedation. This may require an airway intervention and potentially interrupt the procedure.

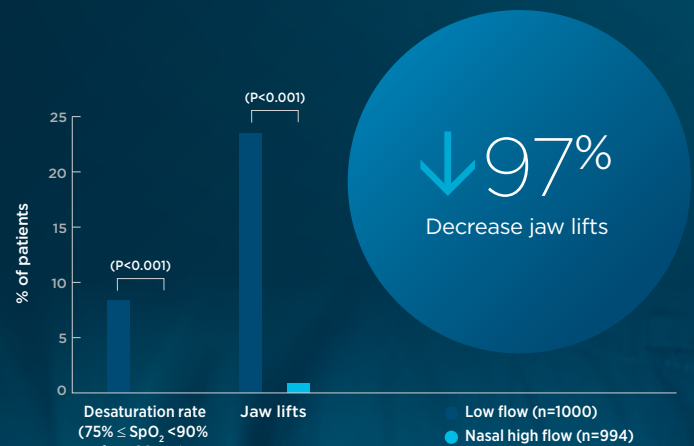
Nasal High Flow (NHF) is a unique airway management technique and its utilization during procedural sedation has been shown to maintain oxygen saturation<sup>1-3</sup> and improve patient safety<sup>4</sup>. NHF provides airway pressure<sup>5,10-11</sup>, and increases end-expiratory lung volumes with high flows of 100% oxygen<sup>5-7</sup>. This has been shown to reduce risk of hypoxemic events<sup>4,9,12-13</sup> and the incidence of airway-related interventions<sup>8-9,4</sup>, which in turn reduces the risk of procedural interruptions<sup>4</sup>.

**Reducing the risk of hypoxemic events might allow you to get on with your list!**

Nay et al., 2021 | High risk GI endoscopy patients<sup>8</sup>



Lin et al., 2019 | Low risk GI endoscopy patients<sup>9</sup>

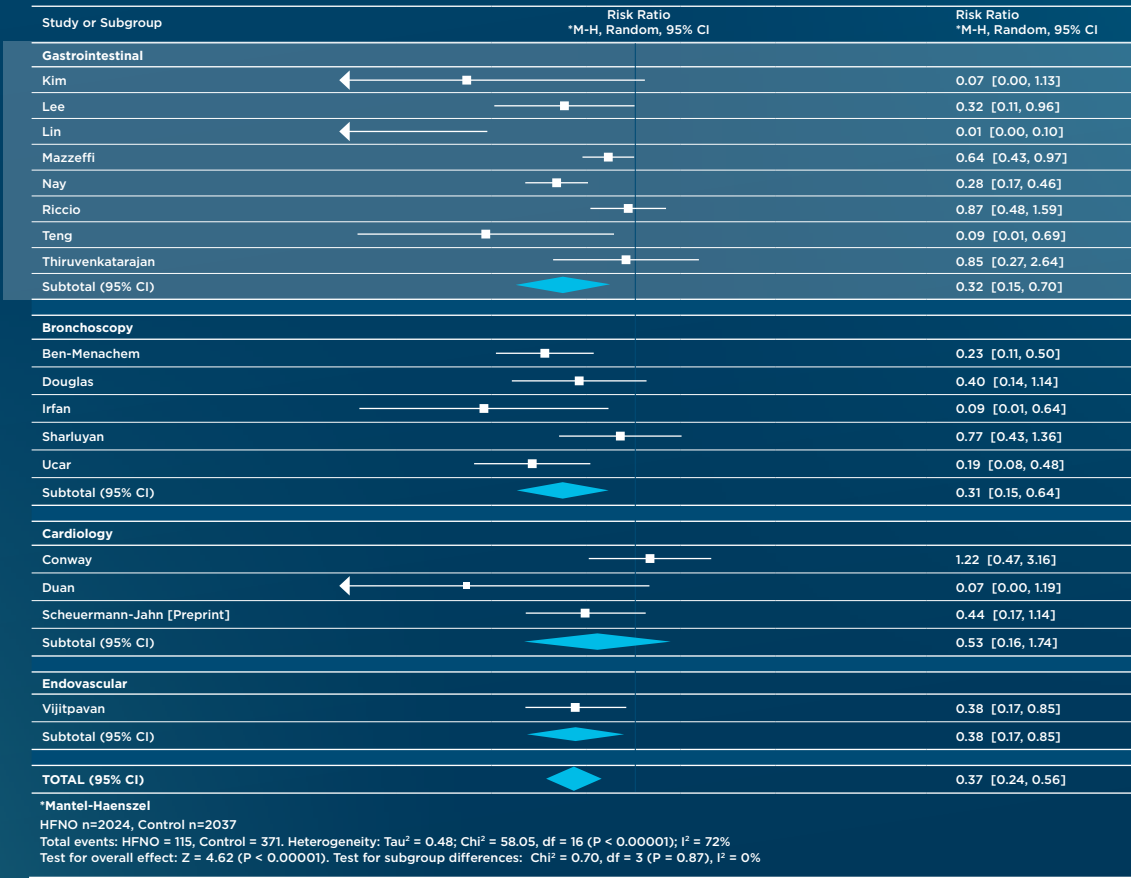




**Thiruvankatarajan et al., 2023.**

Meta-analysis by Thiruvankatarajan et al. demonstrated the efficacy of High Flow Nasal Oxygen (HFNO) for reducing the risk of hypoxemia and requirement for airway maneuvers and procedural interruptions.<sup>4</sup>

**Forest plot comparing risk of hypoxemia between the HFNO and control groups.**



This meta-analysis included 7 RCTs in the GI endoscopy environment

**Overall study results:**

↓ 83%

Decrease in risk of procedural interruptions

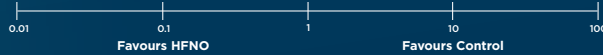
↓ 74%

Decrease in risk of airway maneuvers

↓ 63%

Decrease in risk of hypoxemia

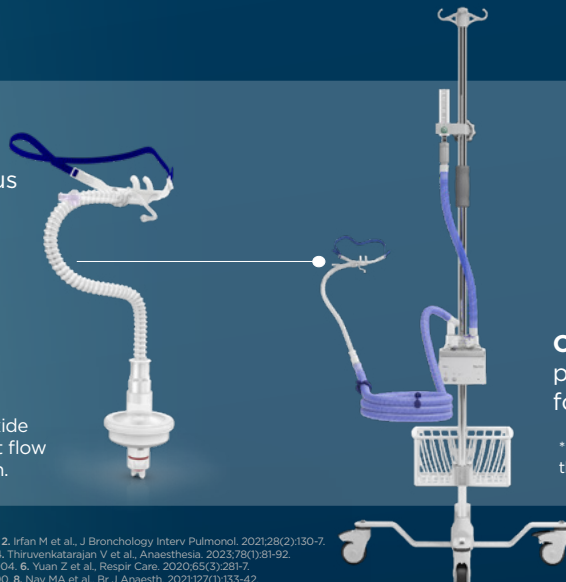
Adapted from Thiruvankatarajan et al., 2023.



**F&P Optiflow Trace™ interface**

enables continuous sampling of exhaled CO<sub>2</sub> from either the mouth or nose\* whilst using Nasal High Flow for oxygenation.

\*Qualitative carbon dioxide sampling can be used at flow rates from 5 to 50 L/min.



Up to 70 L/min



Heated humidification



Up to 100% O<sub>2</sub>

**Optiflow Oxygen Kit** can be used on multiple patients, when used with a filtered nasal interface, for a maximum of 24 hours\*\* after setup.

\*\* Do not use on more than 30 patients within a 24-hour period. Refer to the user instructions for the filtration efficiency requirements of the filter.

1. Kim SH et al., Can J Anaesth. 2021;68(4):460-6. 2. Irfan M et al., J Bronchology Interv Pulmonol. 2021;28(2):130-7. 3. Lee MJ et al., Dig Dis Sci. 2022;67(8):4154-60. 4. Thiruvankatarajan V et al., Anaesthesia. 2023;78(1):81-92. 5. Corley A et al., Br J Anaesth. 2011;107(6):998-1004. 6. Yuan Z et al., Respir Care. 2020;65(3):281-7. 7. Tatsushi W et al., Respir Care. 2020;65(2):183-90. 8. Nay MA et al., Br J Anaesth. 2021;127(1):135-42. 9. Lin Y et al., Gastrointest Endosc. 2019;90(4):591-601. 10. Parke RL et al., Respir Care. 2015;60(10):1397-403. 11. Parke RL et al., Respir Care. 2011;56(8):1151-5. 10. Parke RL et al., Respir Care. 2015;60(10):1397-403. 13. Su CL et al., PLoS One. 2021;16(12):e026076.

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