

## Press release

No. 63e / November 18, 2009

Page 1 / 2

### **Current NIV study: Combined use of face and nasal masks**

A nasal mask such as the new ClassicStar may provide increased patient comfort during non-invasive ventilation (NIV)

**Lübeck – Indisputably, NIV therapy is now widely used for mechanical ventilation purposes of patients suffering from acute respiratory insufficiency. Evidence shows that, in many cases, the traditional face mask is the first choice in terms of initial NIV treatment. After 24 to 48 hours of non-invasive ventilation, using a nasal mask instead may well be appropriate for stable patients and provide increased treatment comfort<sup>i</sup>. With ClassicStar, available as either ventilated or non-ventilated nasal masks, Dräger now offers hospitals a complete portfolio of NIV masks.**

In comparison to face masks, nasal masks generally offer the advantage that they prevent sputum from remaining in the mask body and thus from entering the respiratory tract of the patient. In addition, nasal masks also allow patients to talk<sup>ii</sup>. To sum it all up: Nasal masks offer patients more freedom. The aim of a prospective, randomized and controlled clinical study was to investigate the treatment course of non-invasive ventilation using a face mask and, alternatively, a nasal mask. Two patient groups of 90 subjects in total, suffering from hypercapnic acute respiratory failure participated in this study<sup>i</sup>. Following the evaluation of the results, the recommendation was as follows: The face mask is suitable for use during the initial non-invasive treatment phase to prevent possible oral leakages. Using a nasal mask may well be an option to be considered, providing the patient is in a stable condition after 24 to 48 hours. This helps to reduce side effects such as skin irritations, ear and neck strain, which were observed following extended wearing of face masks, and may, therefore, provide increased patient comfort. Another result of the study was: Concerning the successful treatment of hypercapnic acute respiratory failure, using a nasal mask – providing the absence of larger leakages – may deliver as good a result as the use of a face mask does.

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Page 2 / 2

### Optimal adaptation due to flexible air cushion body

In the development of the new, single-use Dräger ClassicStar nasal masks emphasis was placed on minimizing the risk of skin irritations and pressure marks that can be caused as much as possible. The air cushion, which can be inflated and deflated by means of a pumping ball, allows to individually adjust the mask to the patient's facial contours. The adjustable mask cushion as well as the variable forehead support and the forehead pad provide better sealing and a higher degree of wearing comfort at the same time. Three sizes are available. A separate Dräger size template makes it easy to determine the patient's nose length and width first and thus helps to select the correct ventilation mask in each case. The ClassicStar NIV nasal mask is available as a non-ventilated mask for use with respiratory equipment with an active exhaust system. A ventilated version for respiratory equipment with continuous positive airway pressure, without an active exhaust expiration system is also available.

(number of characters incl. spaces: 3,168)

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<sup>i</sup> Girault, Christophe, et al.: Interface Strategy during noninvasive positive pressure ventilation for hypercapnic acute respiratory failure, in: Crit Care Med., 2009, 37(1): 124-131

<sup>ii</sup> Pravinkumar, S. Egbert: A face that matters in distress: Interface selection for acute noninvasive ventilation, in: Crit Care Med 2009; 37(1):344-346

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