

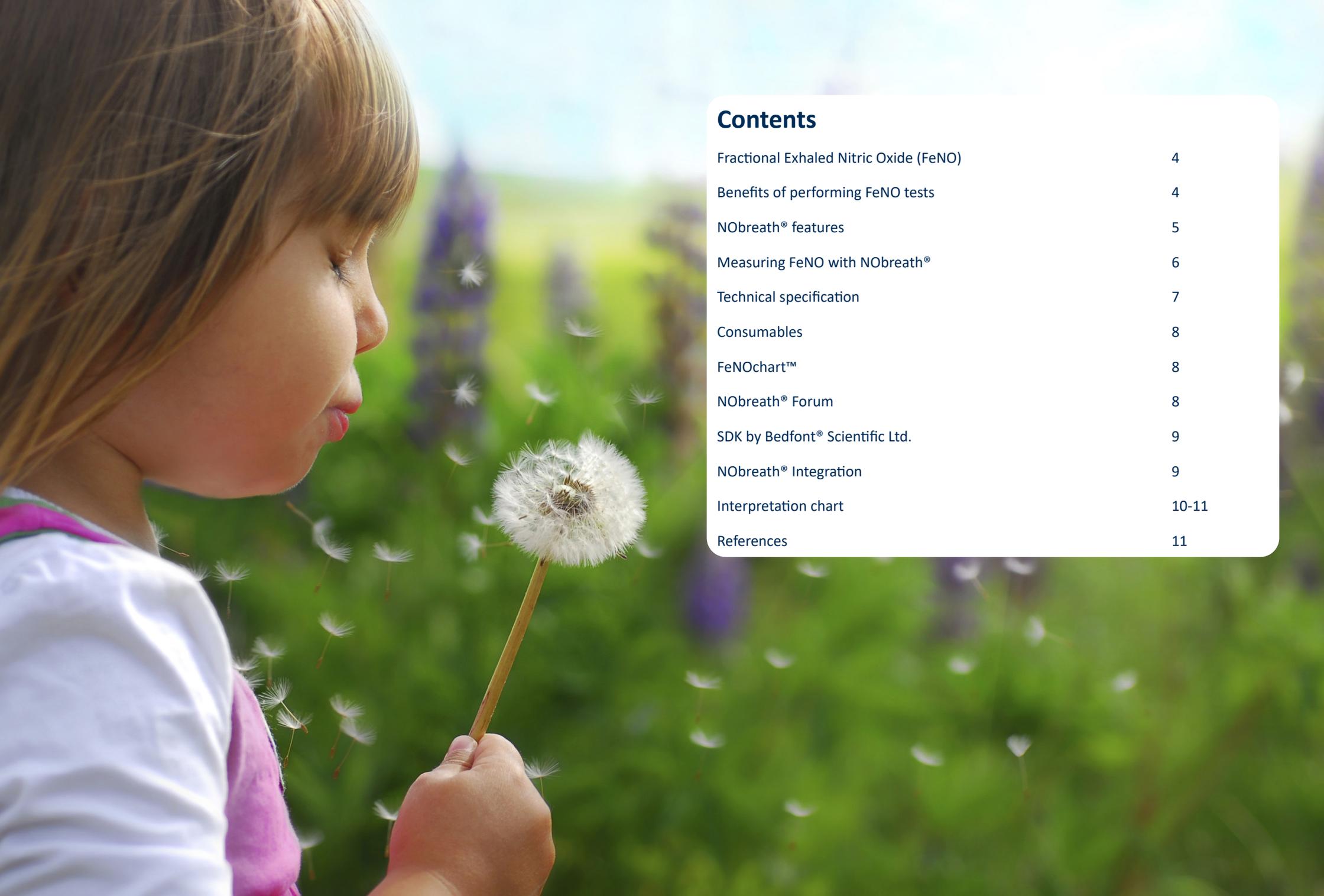
# Measure breath nitric oxide for airway inflammation with the **NObreath<sup>®</sup>** FeNO Device



*Aids in the diagnosis and management of asthma, one breath at a time.*

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## Fractional Exhaled Nitric Oxide (FeNO)

Fractional exhaled Nitric Oxide (FeNO) is a good marker for eosinophilic airway inflammation, and is considered to be a good indicator of corticosteroid response<sup>1</sup>.

The production of nitric oxide is often found to be higher in inflammatory conditions such as asthma; therefore FeNO monitoring can be used for the detection and management of such conditions<sup>2</sup>, but also to differentiate between COPD, ACOS and other interstitial lung diseases that are not assessed by other means, such as lung function<sup>3</sup>.

Nitric oxide measurement is not intended as a stand-alone method for diagnosis and should be used in conjunction with other evaluation methods and tests<sup>4</sup>. FeNO measurement is a simple, rapid, highly reproducible, and non-invasive method of airway inflammation assessment, which until now, has been an expensive test to deliver in everyday practice<sup>5</sup>.

### Benefits of performing FeNO tests:

- Non-invasive, quick and easy to perform<sup>5</sup>.
- Aids in asthma management, assisting with the correct prescription and making monitored adjustments.
- Shows patient adherence to treatment<sup>6</sup>.
- Aids in identifying good and poor adherence to corticosteroid treatment<sup>1</sup>.
- Good indicator of corticosteroid response<sup>1</sup>.
- Shown to be superior to the majority of conventional tests of lung function, such as peak flow recording and spirometry<sup>5</sup>.
- Aids in differentiating between allergic (eosinophilic) and non-allergic asthma<sup>7</sup>.

## NObreath® features

An ergonomic design, fully-portable and incorporated with antimicrobial technology for optimum infection control.



\*Subject to correct use, maintenance and service. Tested up to 29,000 tests.

## Measuring FeNO with NObreath®

IT'S AS EASY AS:



## Technical specification

Concentration range		5 - 500 ppb
Display		Full colour touchscreen
Detection principle		Electrochemical sensor
Repeatability		± 5 ppb of measured value ≤ 50 ppb ± 10% of measured value > 50 ppb
Accuracy		± 5 ppb of measured value ≤ 50 ppb ± 10% of measured value > 50 ppb
Power	NObreath® Device	1 x main rechargeable Li-ion battery – Approx. 100 uses on fully charged battery Model: RRC1120. Voltage: 3.6 V / 3.7 V Capacity: 2350 mAh / 2000 mAh 2 x Li-ion coin cell batteries – Approx. 5 years Model: LIR2032/LIR2032H. Voltage: 3.7 V. Capacity: 45 mAh/70 mAh Model: LIR2450. Voltage: 3.7 V. Capacity: 120 mAh
	Plug	Input: 100 - 240 V ~ 50/60 Hz., 0.2 A Output: 5.0 V, 1.0 A
T <sub>90</sub> response time		≤ 10 seconds
Temperature	Operating	15 - 30°C
	Storage/transport	0 - 50°C
	Calibration	21°C ± 4°C (17°C - 25°C)
Humidity	Operating	20 - 80% RH (non-condensing)
	Storage/transport	5 - 95% RH (non-condensing)
Operating/transport/ storage altitude		-1700 ft. to 6300 ft.
Operating/transport/storage pressure		800 – 1080 mbar
Expected sensor operating life		5 years (subject to servicing)
Limit of Detection		5 ppb
Sensor drift		< 5% per annum
Dimensions		Approx. 90 mm x 159 mm x 59 mm
Weight		Approx. 400 g
NObreath® Materials		Case: polycarbonate/ABS blend with antimicrobial technology
Breath test time	Adult	12 seconds
	Child	10 seconds
	Ambient	30 seconds
Warm-up time		≤ 60 seconds
Maximum ambient operating level		350 ppb NO
CO cross interference		45 ppm ≤ 17.6 ppb

NOTE: Exhaled flow during FeNO measurement at 50 ml / sec ± 10% at 10 cm H<sub>2</sub>O.

## Consumables

### NObreath® Mouthpiece

The NObreath® uses a single-patient use mouthpiece, which contains an integrated infection control filter that removes and traps > 99% of airborne bacteria and > 98% of viruses<sup>8</sup>.

Dimensions	Approx. 180 mm x 28 mm x 22 mm
Weight	Approx. 14 g
Material	Polypropylene
Shelf life	5 Years

### FeNOchart™

FeNOchart™ is a free patient management software, available with every NObreath®. FeNOchart™ enables you to track patients' progress, view live readings, download results plus much more.



**FREE FeNOchart™ patient management software.**

### NObreath® Forum

Purchasing a NObreath® entitles you to free membership of the NObreath® forum. The NObreath® forum is an international, invitation-only platform where professionals using the Bedfont® NObreath® FeNO device can communicate, share experiences and knowledge, and ask for other professional opinions. There is no cost or obligation to participate and membership is free when you purchase a NObreath®.



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## SDK by Bedfont® Scientific Ltd.

Designed for developers who want to bring accurate health monitoring and real-time data to their apps, our SDKs offer a direct link to Bedfont's trusted medical devices. Whether you're building an app for asthma management or personalised wellness, our SDKs provide secure, compliant, and straightforward connectivity. Give your users the power of clinical-grade insights with just a few lines of code. Turn your app into a health solution today!

An SDK is a Software Development Kit, a collection of tools, libraries, documentation, and code samples. Developers can use SDKs to build applications for specific platforms, frameworks, or programming languages. An SDK is designed to simplify and speed up development by providing all the components needed to create software for a particular environment. There is also a Flutter wrapper that lets developers use Flutter to write iOS and Android interfaces with a single, unified codebase.

### NObreath® Integration

Our NObreath® SDK is designed to enable you to integrate the functionality of our NObreath® FeNO devices into your software application.

The NObreath® SDK offers the following functionality for iOS and Android devices:

- Start test
- Get FeNO reading in ppb
- Start retest
- Disable the touch interface
- Multiple device connection
- Get battery status
- Get model
- Get firmware version
- Disable sounder

You can choose which of these functions to use.

For more information and to apply please visit:

<https://www.bedfont.com/sdk/>



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# Using FeNO to assist diagnosis

Measuring airway inflammation with NObreath® can help monitor the effectiveness

Aid in diagnosis using the NObreath® FeNO device			
FeNO (ppb) Levels	LOW < 25 ppb (< 20 ppb in children)	INTERMEDIATE 25 - 50 ppb (20 - 35 ppb in children)	HIGH > 50 ppb (> 35 ppb 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 Chord Dysfunction
- GERD

Nitric oxide measurement is not intended as a stand-alone method for diagnosis and should be used in conjunction with other evaluation methods and tests<sup>4</sup>.



# & management of Asthma

of medication and can be used to predict the risk of Asthma attacks\*.

Monitoring (in patients with diagnosed asthma) using the NObreath® FeNO device			
FeNO (ppb) Levels	LOW < 25 ppb (< 20 ppb in children)	INTERMEDIATE 25 - 50 ppb (20 - 35 ppb in children)	HIGH > 50 ppb (> 35 ppb 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)	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  Steroid resistance
<b>Symptoms Absent</b>	Adequate ICS dose  Good adherence  ICS taper	Adequate ICS dosing  Good adherence  Monitor Change in FeNO	ICS withdrawal or dose reduction may result in relapse  Poor adherence or inhaler technique

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1. Price D, Ryan D, Burden A, Von Ziegenweid J, Gould S, Freeman D et al. Using fractional exhaled nitric oxide (FeNO) to diagnose steroid-responsive disease and guide asthma management in routine care. *Clinical and Translational Allergy*. 2013;3(1).
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\* FeNO is not a definitive indication of asthma and should be used in conjunction with (but not limited to) spirometry, patient history, symptoms.  
\*\* Allergic = Eosinophilic / Non- Allergic = Non-Eosinophilic.

## NICE/BTS/SIGN Guidelines for interpreting FeNO levels<sup>9</sup>

The National Institute for Health and Care Excellence (NICE), the British Thoracic Society (BTS), and the Scottish Intercollegiate Guidelines Network (SIGN) updated and published a joint guideline on asthma diagnosis, monitoring, and chronic asthma management.

Diagnosis	
Adults	Children
> 50 ppb or higher	> 35 ppb or higher
<ul style="list-style-type: none"><li>• FeNO testing recommended first-line testing in asthma diagnosis for adults and children.</li><li>• If the first test is diagnostic further diagnostic testing is not required.</li></ul>	
Management	
<ul style="list-style-type: none"><li>• FeNO testing has been acknowledged as a tool in asthma management.</li><li>• Aids to inform healthcare professionals when changing or adjusting asthma therapy.</li><li>• Recommending FeNO use for asthma monitoring in adults.</li></ul>	

### References

1. Price D, Ryan D, Burden A, Von Ziegenweid J, Gould S, Freeman D et al. Using fractional exhaled nitric oxide (FeNO) to diagnose steroid-responsive disease and guide asthma management in routine care. *Clinical and Translational Allergy*. 2013;3(1).
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distributors for a free demonstration.

[www.bedfont.com](http://www.bedfont.com)  
Tel: +44 (0)1622 851122  
Email: [ask@bedfont.com](mailto:ask@bedfont.com)

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**Bedfont<sup>®</sup> Scientific Ltd.**  
Station Road, Harrietsham, Maidstone,  
Kent, ME17 1JA England  
Tel: +44 (0)1622 851122 Fax: +44 (0)1622 854860  
Email: [ask@bedfont.com](mailto:ask@bedfont.com) Web: [www.bedfont.com](http://www.bedfont.com)



**Emergo Europe B.V.**  
Westervoortsedijk 60  
6827 AT Arnhem  
The Netherlands.

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