



Aeriflux

Non-invasive diagnosis of
Acid Reflux Cough



Diagnose Acid Reflux Cough in Respiratory Illnesses

Chronic Cough
Asthma
Chronic Obstructive Pulmonary Disease
And others.

Aeriflux is a series of simple breath tests that identify when acid reflux is causing coughs

Aeriflux is simple, fast and accurate

- The patient provides breath samples in their home.
- Our laboratory then performs the assay.
- Acid in breath associated particularly with cough is highly diagnostic of acid reflux cough.

And with the diagnosis in hand, the right therapy can be prescribed with confidence.

Get the Data.
Know the Answer.
Aeriflux.™

ACID REFLUX CAUSES COUGH AND OTHER RESPIRATORY SYMPTOMS.

Measurement of pH in the esophagus does not always make sense when diagnosing an airway disorder such as acid reflux cough. **Measurement of *airway* pH is what is needed.** Aeriflux does just that, and all the patient has to do is breathe. No discomfort, no hassles. Samples can be collected by the patient in the clinic and at home.

Aeriflux is an easy test that can be performed *early* in the diagnostic process.

To obtain Aeriflux, please contact Respiratory Research, Inc.

www.aeriflux.com
www.respiratoryresearch.com
Email:
Info@respiratoryresearch.com
By phone ++1 434 825-7627.

Respiratory Research, Inc.
www.aeriflux.com



Aeriflux™

Simple to use.

The rational way to diagnose acid reflux cough.

Aeriflux™ begins with 8 special breath collection tubes, called RTubes™. Each RTube is a disposable device through which the patient breathes for 5 minutes. While the patient breathes, the RTube™ traps the exhaled breath moisture, which contains acid after acid reflux events. After eight samples are collected (usually within a day or two), the patient simply mails them in a pre-paid mailer to our centralized laboratory which measures the acid in the breath samples with a highly validated patented process known as the Aeriflux assay. Within 3 days, we will fax the results of the tests to the requesting prescriber, along with guidelines for interpretation. It is as simple as that.

Acid in the breath means there is acid in the airway.

From the patient's point of view, providing breath samples is very easy and completely safe. Within 10 minutes of a coughing episode, the patient begins breathing through an RTube™ collector for 5 minutes. They cap the collector tube, write their name, birthdate, and today's date and time on the RTube™ label, check off the box next to the word "Cough", and set the tube aside. Six samples are collected in this manner. Additionally, if possible, two samples are collected during the day when the patient has not been coughing in the previous 30 minutes. They check off the box for "No Symptoms" on the RTube label for these two samples. After all eight samples are collected, the patient places all the samples in the pre-paid pre-labeled express shipping box, calls the supplied phone number for Fedex to pick up the box, and we take it from there.

From the Clinician's (Physician, Nurse Practitioner, Physician Assistant, Respiratory Therapist) point of view, Aeriflux™ provides straightforward answers to a previously difficult to diagnose condition: Acid Reflux Cough.

At least half the time that a *subspecialist physician* (Pulmonologist, Allergist, ENT) thinks that Acid Reflux could be causing cough, the patients do not get better with a commonly used diagnostic trial of Proton pump inhibition (in other words, the prescribed three-month therapeutic trial fails). Diagnostic trials of PPI are commonly confounded by spontaneous resolution of the symptoms, in which case one never knows that the expensive proton pump inhibitor can be stopped. Importantly, in patients with various respiratory diseases (asthma, COPD and others) symptomatic worsening can occur because of allergy exposure or bacterial or viral infection, making a concurrent diagnostic trial of PPI therapy seem to fail even when acid reflux was contributing to the cough, again misleading the clinician and patient. Although diagnostic trials are commonly used, it is important to understand these limitations.

Aeriflux™ provides objective data that overcome these obstacles. The dominant mechanism by which acid reflux causes cough is through aspiration of small amounts of stomach acid. When cough is associated with breath acidification, acid reflux cough is confidently diagnosed, and a positive response to proton pump inhibition can be expected.

By using Aeriflux, long and expensive therapeutic trials with proton pump inhibition can be avoided, for you will know if the patient is likely to respond or not in advance. And if they don't respond, you will appropriately suspect a concurrent, confounding condition.

The performance characteristics of Aeriflux have been determined by Respiratory Research, Inc. The test has not been cleared or approved by the FDA. The FDA has determined that such clearance or approval is not required.

QUICK FACTS

1. Acid reflux occurs in over 50% of severe asthmatics, and is a likely contributor to respiratory symptoms in most of these.
2. Esophageal symptoms such as heartburn are often not present when a patient has Acid Reflux Cough. It takes very little acid in the airway to cause cough. But this mild acid reflux may well be insufficient to cause any heartburn.
3. Symptomatic gastroesophageal reflux disease (GERD) and heartburn may be present in some patients with asthma without being relevant to their respiratory symptoms.
4. Just because a patient has heartburn does not mean it is causing the cough. Likewise, patients can have acid reflux cough without any symptoms of GERD.
5. Esophageal pH probes are located in the wrong place to identify airway acidification, trigger coughing on their own by physical stimuli, and importantly suffer from inappropriate interpretation. It makes sense that it is airway acidification that is most important in most people.
6. Until Aeriflux, Acid Reflux Cough had been difficult to diagnose rapidly and accurately because of these reasons.

Aeriflux is the answer.

www.aeriflux.com

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