

# Glossary of Terms

**6-minute walk test (6MWD)** — Test to measure your ability to tolerate physical activity. During this test, you walk as far as you can for six minutes at a normal pace.

**Alveoli** — Tiny air sacs in your lungs that deliver oxygen to your bloodstream and remove the carbon dioxide. Alveoli are damaged in people with emphysema.

**Arterial Blood Gas (ABG)** — Measures the amount of oxygen and carbon dioxide in your blood.

**Body Plethysmography** — A test to measure how much air your lungs can hold after you take in a deep breath (called Total Lung Capacity or TLC), and how much air is left in your lungs after breathing out as much as you can (called Residual Volume or RV). Also called a body-box.

**Bronchoscope** — A flexible tube with a camera (called a bronchoscope) which is inserted into your lungs through the nose or mouth.

**Chartis** — A procedure to test for collateral ventilation. A small balloon attached to a catheter is inserted through a bronchoscope into your lungs to temporarily close an airway in a part of the lung and look to see if air is entering the blocked lobe through collateral ventilation.

**Chronic Bronchitis** — One form of COPD in which your lungs produce a lot of mucus which causes a long-term cough. Zephyr Valves cannot be used to treat chronic bronchitis.

**Collateral Ventilation** — When air passes between the lobes of your lungs, like passing through an open window between the lobes. You could be CV+, meaning the air is flowing between the lobes or CV-, meaning it is not. People who are CV+ are not eligible to receive Zephyr Valve treatment. Your doctor can perform a test on the day of your procedure to determine if you are CV+ or CV-.

**COPD** — A chronic inflammatory lung disease that causes obstruction of airflow from the lungs. Symptoms include breathing difficulty, cough, mucus (sputum) production, and wheezing. Emphysema is one form of COPD.

**Diffusing Capacity of the Lungs for Carbon Monoxide (DLCO)** — A measure of how well your lungs can exchange oxygen to your bloodstream from the air that you breathe into your lungs.

**Echocardiogram (Echo)** — A test that uses sound waves to create pictures of your heart. It will provide your doctor information on whether the condition of your heart is stable enough to undergo a bronchoscopic procedure.

**Emphysema** — A lung condition that causes shortness of breath. In people with emphysema, the air sacs in the lungs (alveoli) are damaged. Over time, the inner walls of the air sacs weaken and rupture — creating larger air spaces instead of many small ones.

**Fissures** — A boundary that separates lobes within your lungs from each other.

# Glossary of Terms (continued)

## **Homogeneous and heterogeneous emphysema** —

These terms are used to describe the level of damage throughout your lungs. Heterogeneous emphysema refers to more damage in some areas of the lung compared to others. Homogeneous emphysema refers to damage that is evenly distributed throughout your lungs. Some other treatments are not able to treat both kinds of emphysema. Zephyr Valve treatment has been proven effective in clinical studies for both kinds of severe emphysema.

**HRCT or CT Scan** — Special X-ray procedure that combines many X-ray images with the help of a computer to generate views through your lungs that allows your doctor to evaluate the condition of your lungs.

**Hyperinflation** — Air becomes trapped in your lungs and they overexpand, putting pressure on healthy parts of your lungs and your diaphragm, causing you to feel out of breath.

**Lobes** — Your lungs are divided into five separate lobes, three in the right lung and two in the left lung.

**Minimally invasive procedure** — Any procedure that requires little or no cutting or incisions. Zephyr Valve treatment is performed without any incisions, as the valves are placed in your lungs using a bronchoscope, which is inserted through your nose or mouth.

**Nitinol** — Nitinol is a metal alloy made from Nickel and Titanium.

**Pneumothorax** — A tear in the lung that causes the air to leak from your lungs into your chest space. This is usually treated by putting a small tube in your chest to let out the air from the tear. It can take from a few hours to a few days for the air leak to stop at which time the tube can be removed, and you can go home. If this happens your doctor may need you to stay in the hospital up to a week or longer for the tissue to heal.

**Pulmonary Function Tests (PFTs)** — Breathing tests to measure how well you move air in and out of your lungs and how well oxygen enters your bloodstream.

**Pulmonary Rehabilitation** — A programme of education and exercise to increase awareness about your lungs and your disease and exercises to improve your breathing. Exercising your lungs and your muscles helps you be more active. You may do pulmonary rehabilitation before your procedure to get your lungs as healthy as possible and it is also recommended after your procedure to recondition your lungs and improve your overall breathing.

**Spirometry** — A common test to measure how much air you can breathe into your lungs and how much air you can quickly blow out of your lungs.

**StratX Lung Assessment** — This test evaluates how much damage you have in your lungs and the likelihood that you could benefit from Zephyr Valves treatment. The results help your doctor to identify which lobes could be treated with Zephyr Valves.

# Glossary of Terms (continued)

**VQ Lung Scan or Ventilation Perfusion Scan** — This test measures the distribution of air and blood flow in all areas of the lung and helps your doctor determine which lobes are functioning well and which lobes are functioning poorly.

**Zephyr Valve Treatment** — The Zephyr Valve procedure is minimally invasive and does not require cutting or incisions. A doctor uses a bronchoscope to position a long, flexible catheter into your lungs and place tiny valves into your airways. Once the valves are placed, trapped air in your lungs can escape. The valves also prevent fresh air from entering the part of the lung that has been treated. This causes the treated lobe to collapse and creates room for the healthier parts of your lungs to expand and take in more air.

## Additional Notes

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# Get more information about the Zephyr® Valve treatment for severe emphysema.

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

**Email:** [info@getcopdhelp.co.uk](mailto:info@getcopdhelp.co.uk)

Complications of the Zephyr Endobronchial Valve treatment can include but are not limited to pneumothorax, worsening of COPD symptoms, hemoptysis, pneumonia, dyspnea and, in rare cases, death.

Results from case studies are not necessarily predictive of results in other cases. Results in other cases may vary.

**Brief Statement:** The Zephyr® Endobronchial Valve is an implantable bronchial valve intended to control airflow in order to improve lung functions in patients with hyperinflation associated with severe emphysema with little to no collateral ventilation, and/or to reduce air leaks. The Zephyr Valve is contraindicated for: Patients for whom bronchoscopic procedures are contraindicated; Evidence of active pulmonary infection; Patients with known allergies to Nitinol (nickel-titanium) or its constituent metals (nickel or titanium); Patients with known allergies to silicone; Patients who have not quit smoking. Use is restricted to a trained physician. Prior to use, please reference the Zephyr Endobronchial System Instructions for more information on indications, contraindications, warnings, all precautions, and adverse events.

1. Criner, G.J, Sue, R, Wright, S, Dransfield, M, Rivas-Perez, H, Wiese, T & Morrissey, B. A multicenter randomized controlled trial of Zephyr® endobronchial valve treatment in heterogeneous emphysema (LIBERATE). *Am J Respir Crit Care Med*, 2018; 198(9), 1151–1164.

**zephyr**®  
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