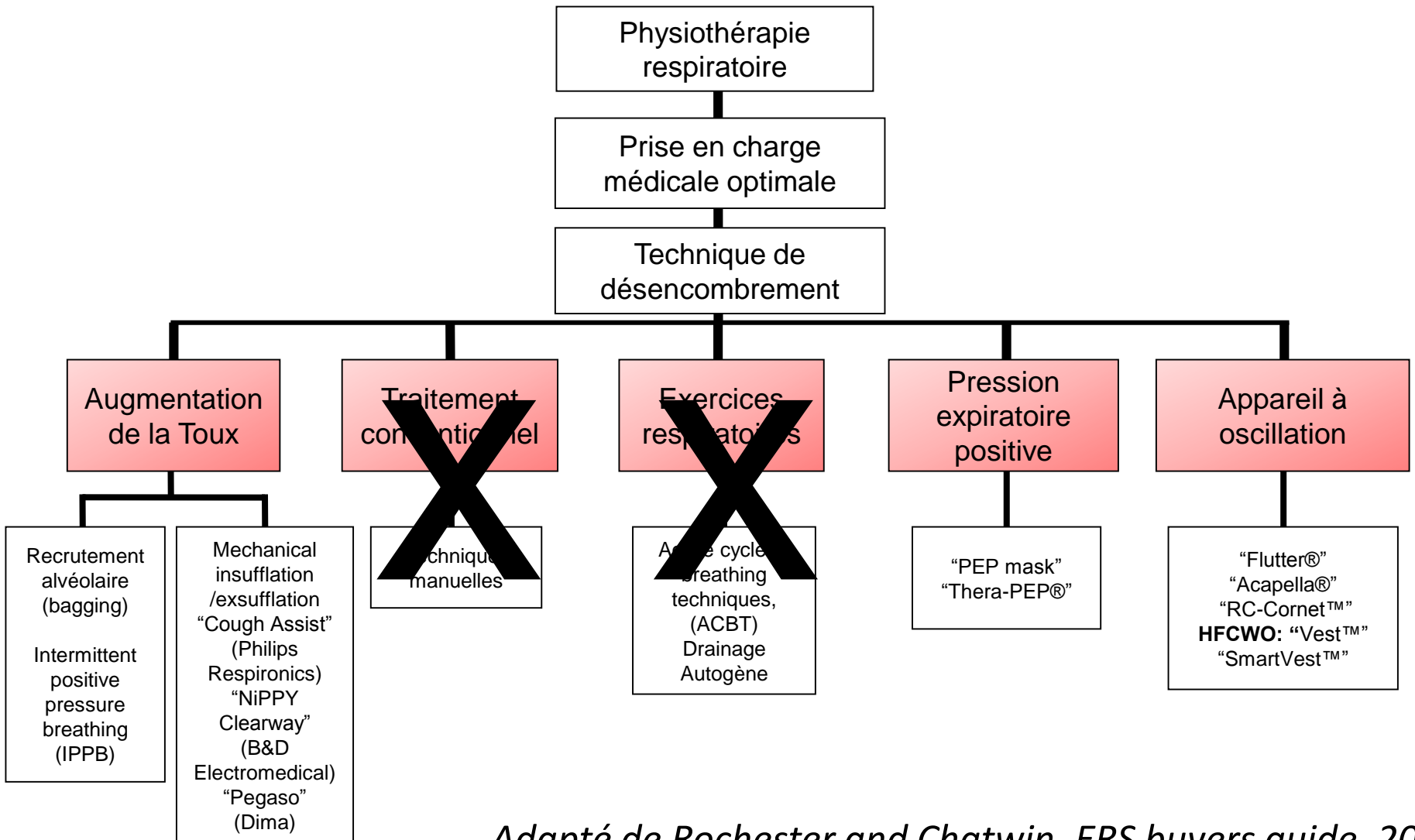


# Quand les mains du kinésithérapeute ne suffisent plus : quels appareils et quand ?

Olivier Contal, PhD  
[olivier.contal@hesav.ch](mailto:olivier.contal@hesav.ch)

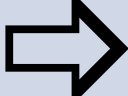

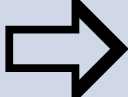
# Méthodes de désencombrement

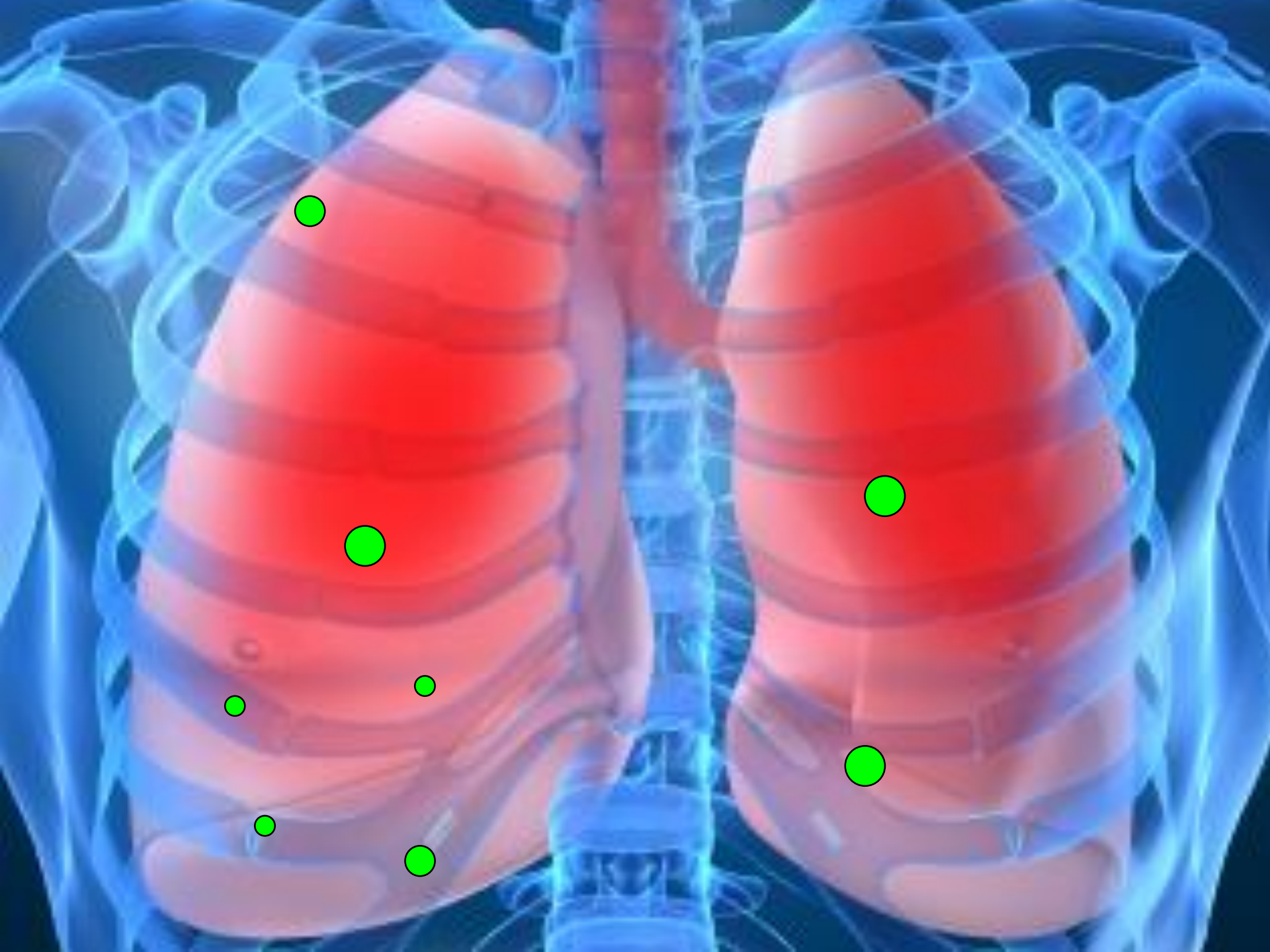


*Adapté de Rochester and Chatwin, ERS buyers guide, 2012*

# Stratégies de désencombrement

# Pourquoi utiliser des techniques instrumentales?

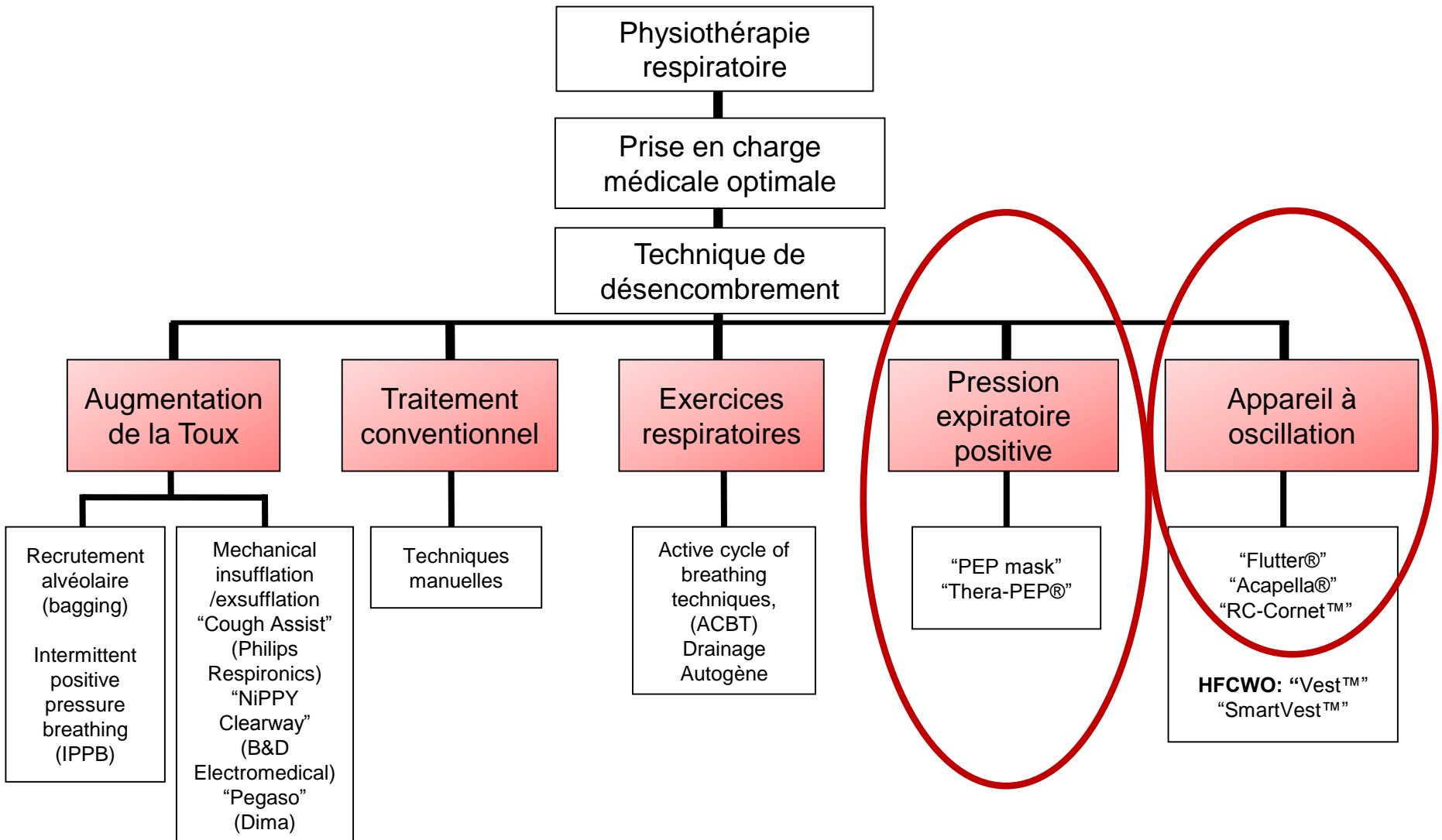
Objectifs		Principes
Ventilation alvéolaire		volume
		
désencombrement		Débit



**Expulsion-toux**



# Méthodes de désencombrement



# Pression Expiratoire Positive et Oscillations

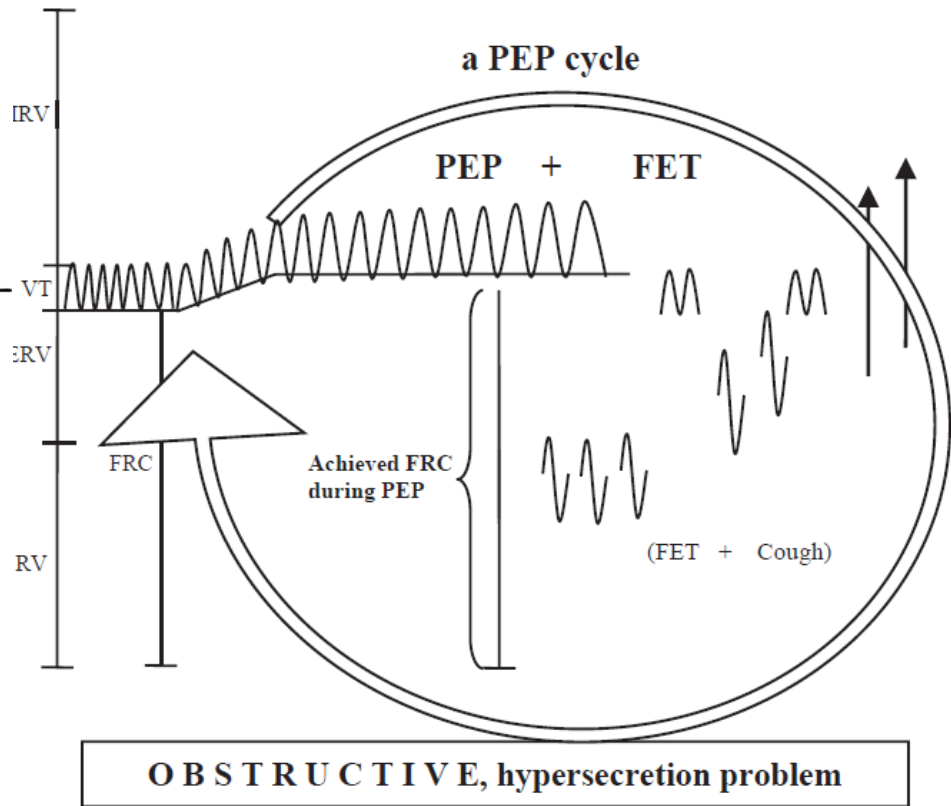
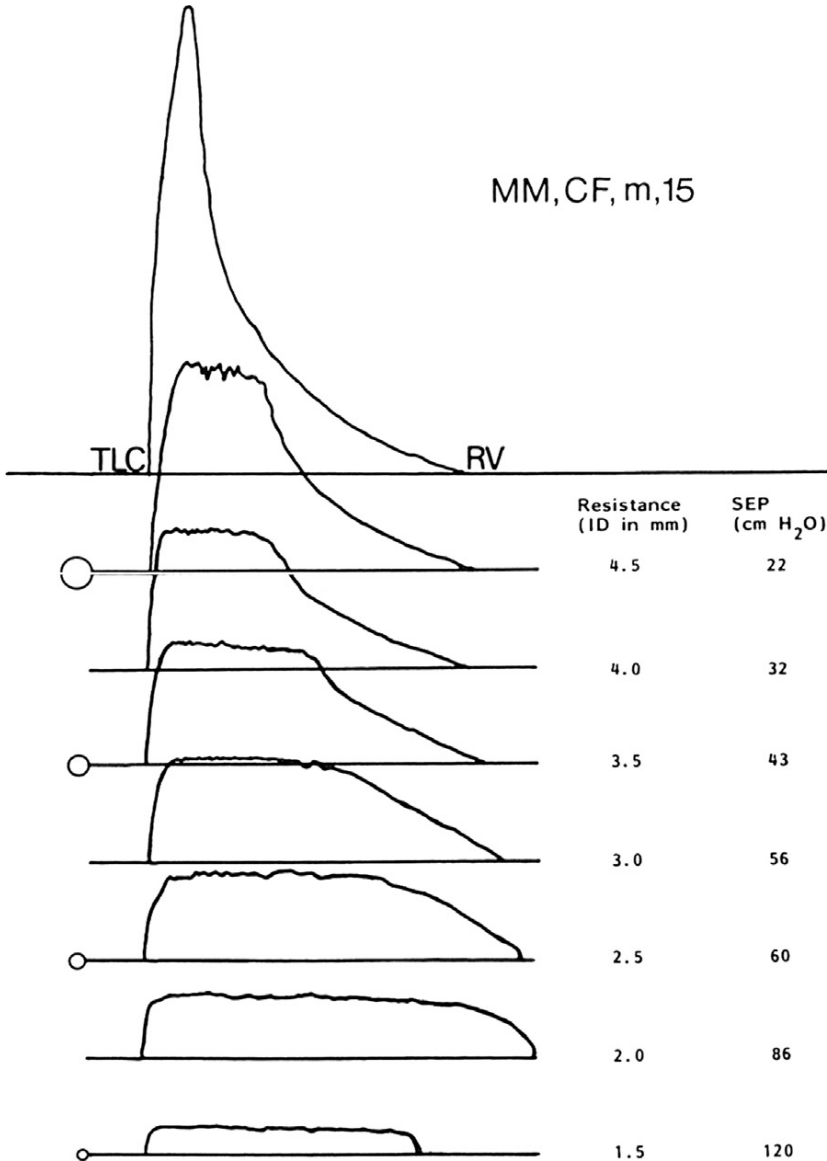


# Quels appareils

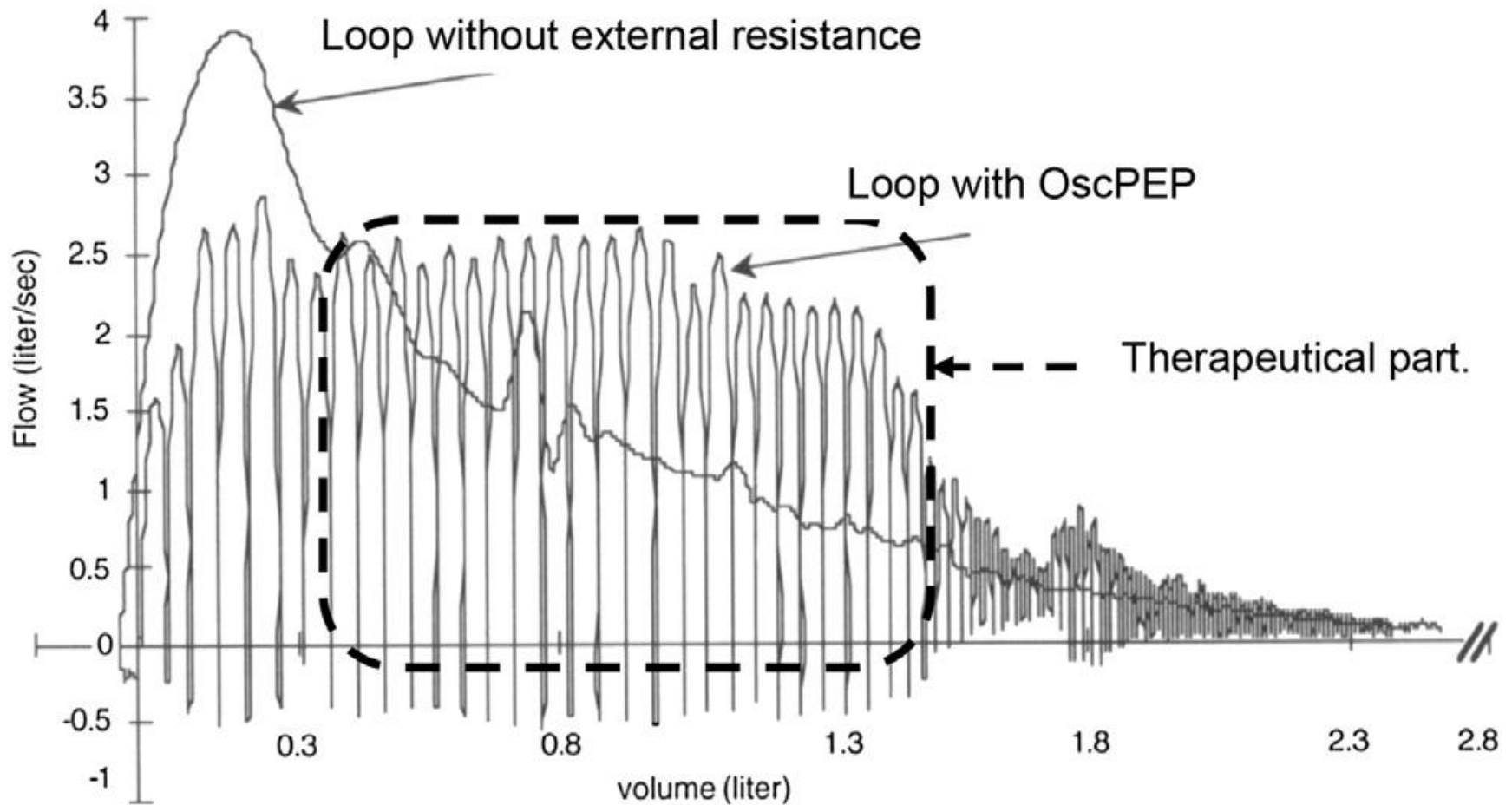


# Hi-PEP et syndrome obstructif

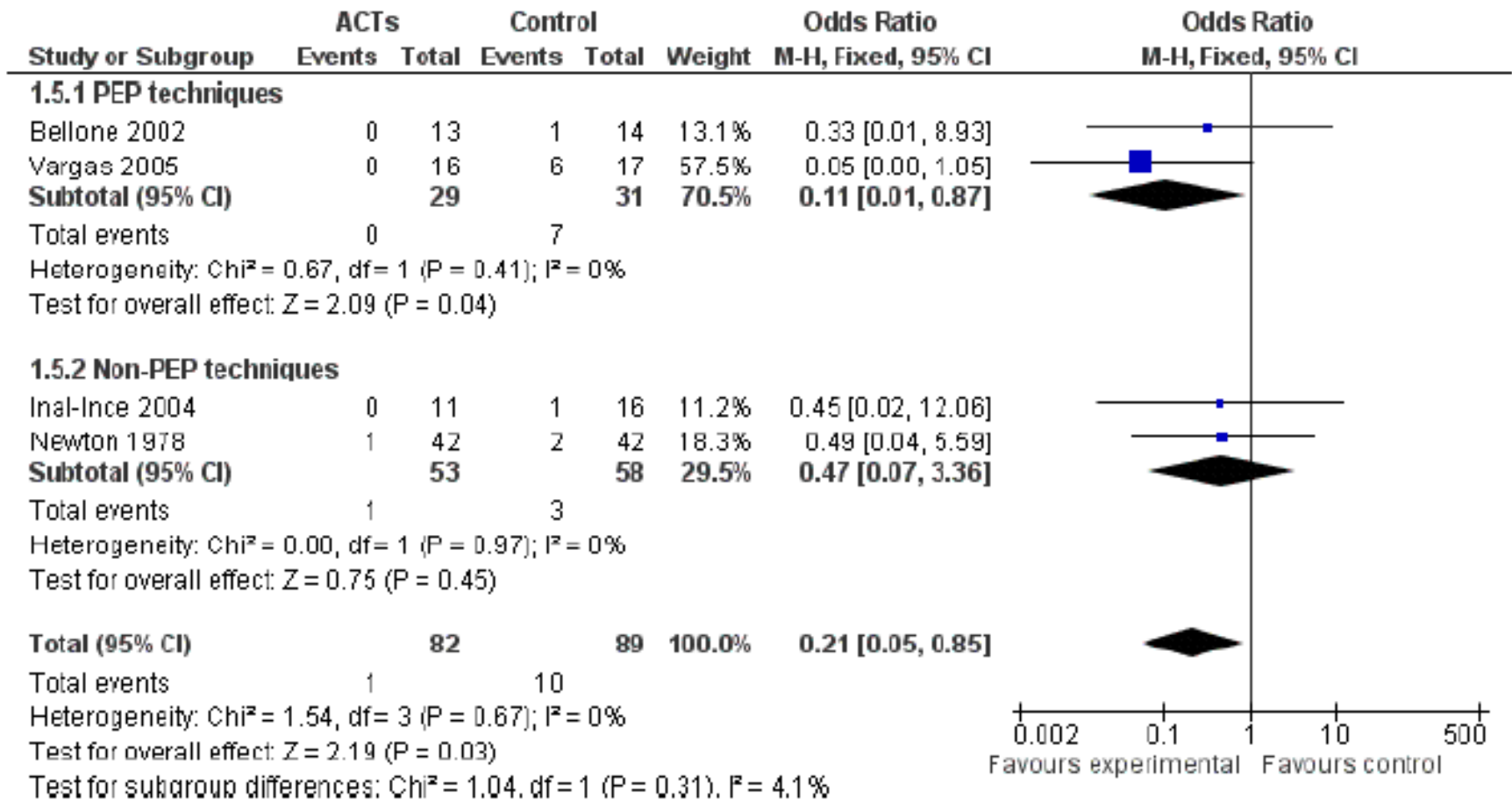
MM,CF,m,15



# Oscillation - PEP et désencombrement



# Désencombrement et besoin d'augmenter la ventilation mécanique



# Méthodes de désencombrement

Physiothérapie  
respiratoire

Prise en charge  
médicale optimale

Technique de  
désencombrement

Augmentation  
de la Toux

Traitement  
conventionnel

Exercices  
respiratoires

Pression  
expiratoire  
positive

Appareil à  
oscillation

Recrutement  
alvéolaire  
(bagging)

Intermittent  
positive  
pressure  
breathing  
(IPPB)

Mechanical  
insufflation  
/exsufflation  
"Cough Assist"  
(Philips  
Respironics)  
"NiPPY  
Clearway"  
(B&D  
Electromedical)  
"Pegaso"  
(Dima)

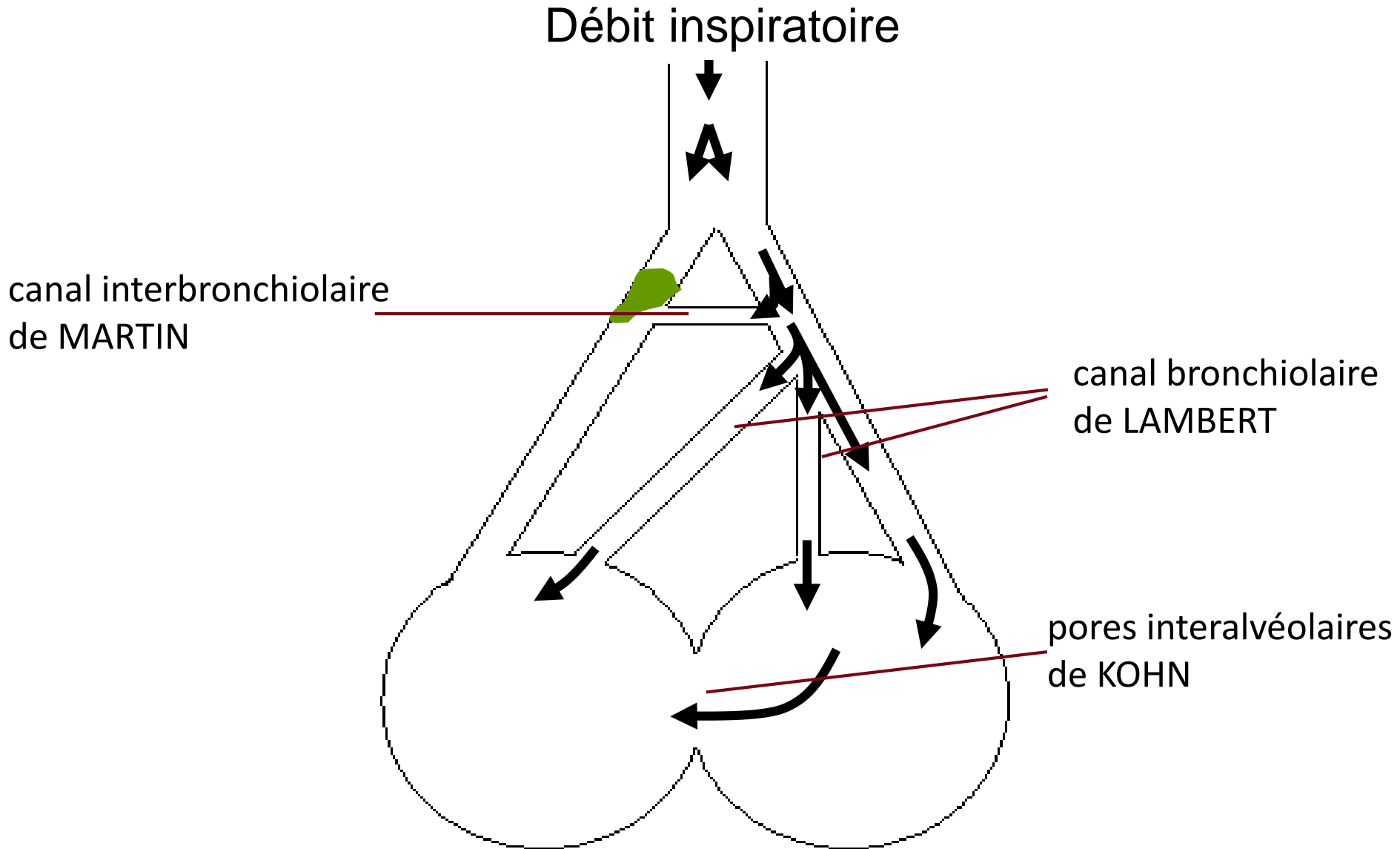
Techniques  
manuelles

Active cycle of  
breathing  
techniques,  
(ACBT)  
Drainage  
Autogène

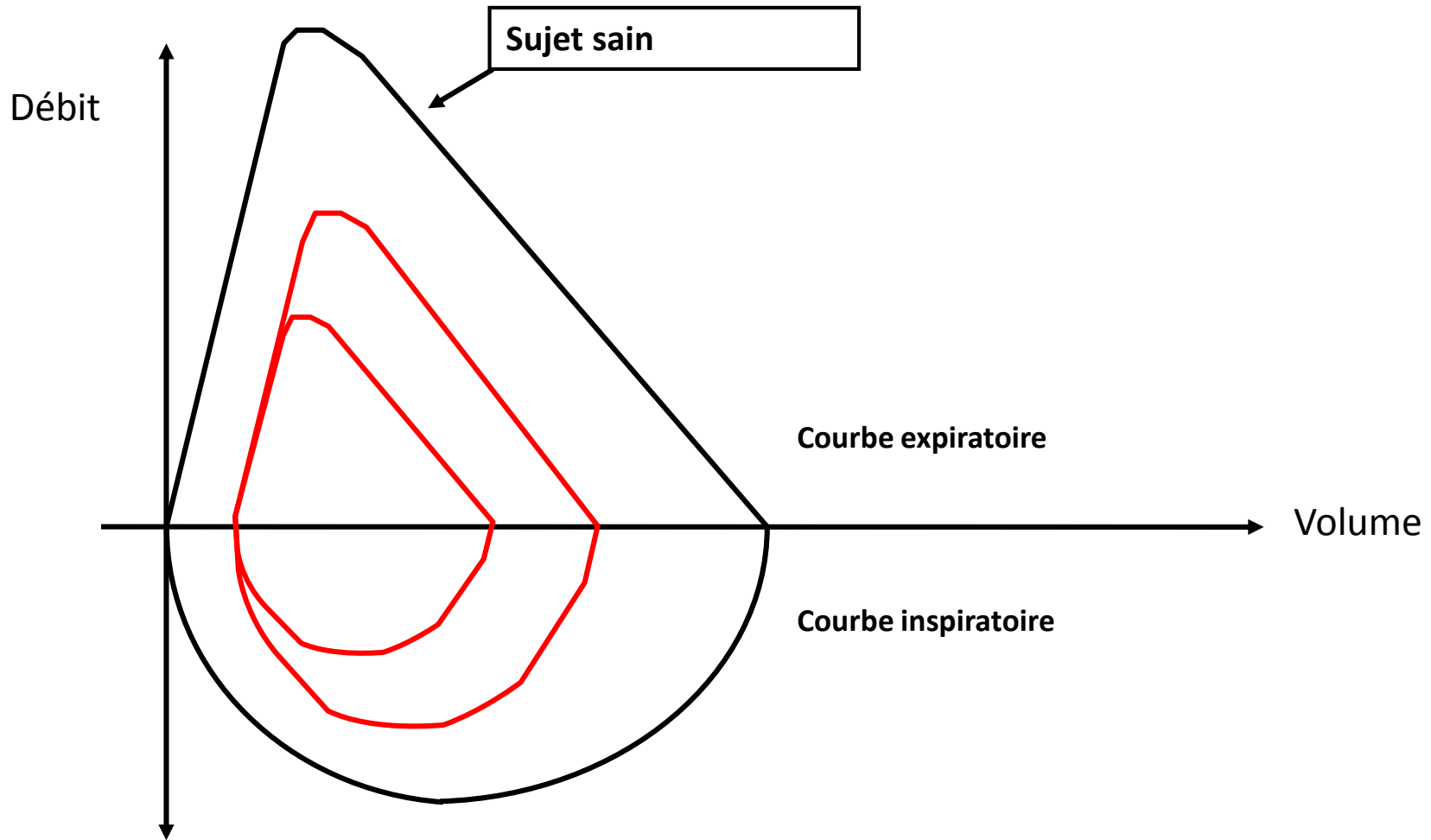
"PEP mask"  
"Thera-PEP®"

"Flutter®"  
"Acapella®"  
"RC-Cornet™"  
**HFCWO:** "Vest™"  
"SmartVest™"

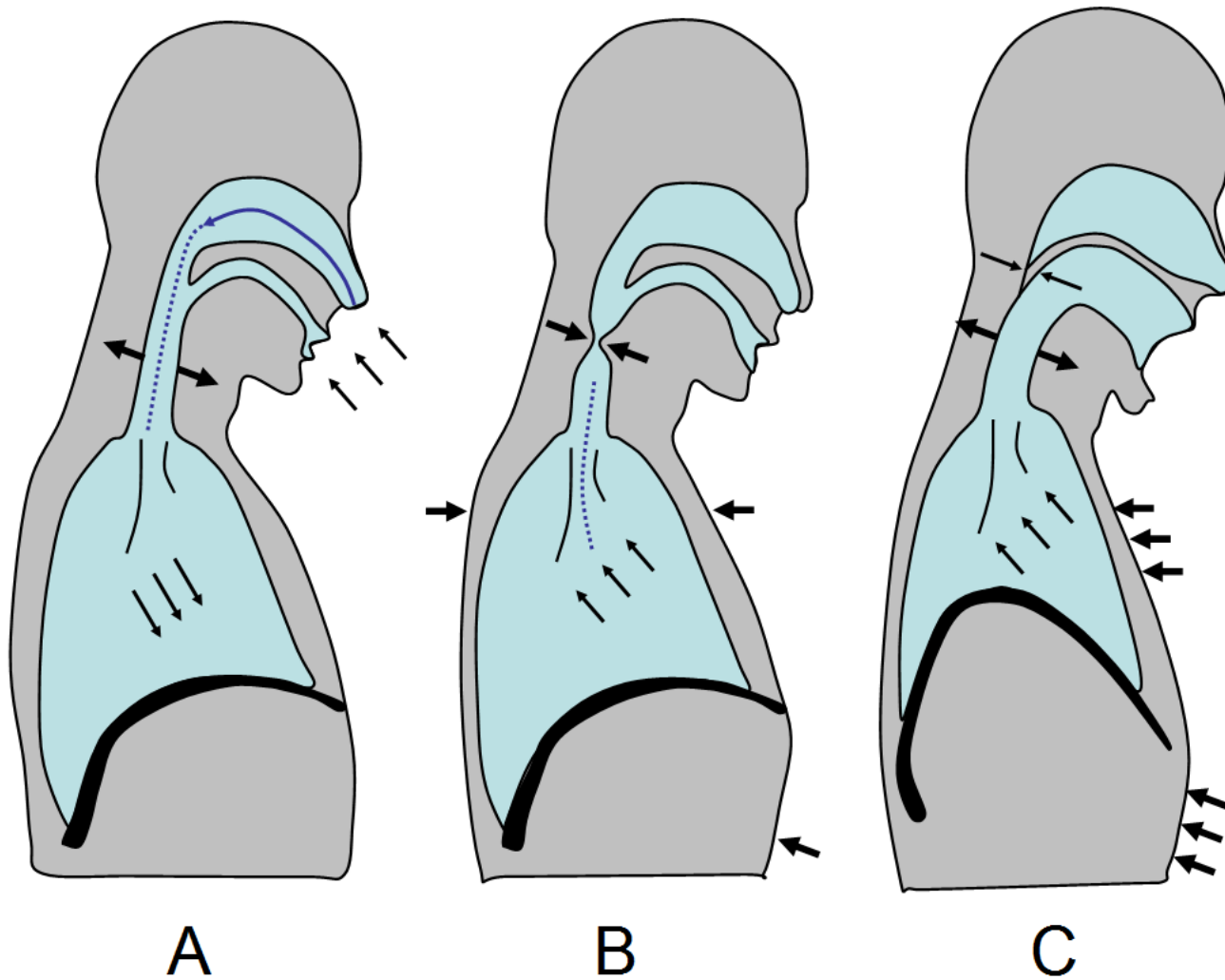
# Ventilation collatérale



# Courbe débit/volume dans le syndrome restrictif

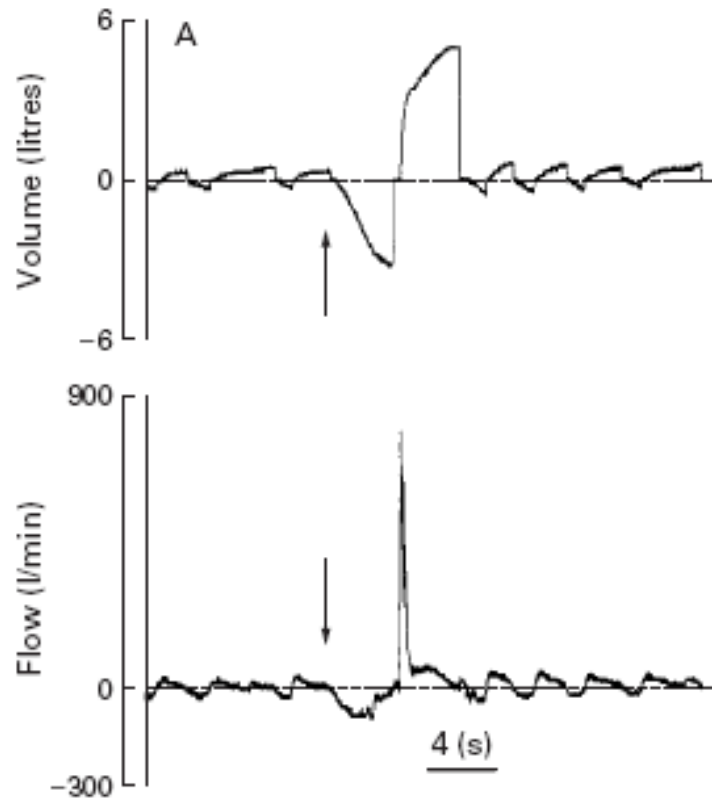


# Les 3 phases de la toux

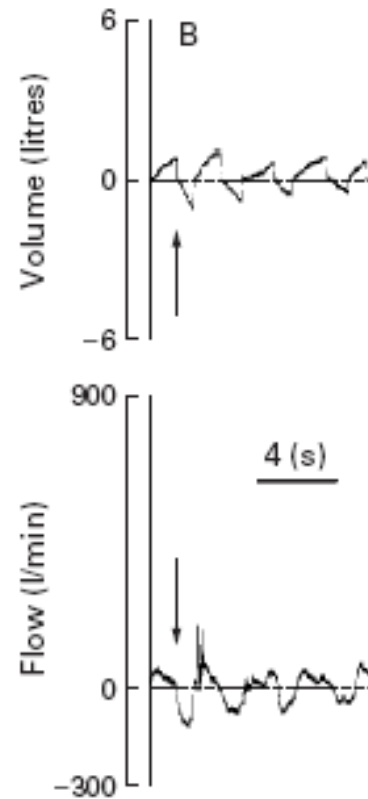




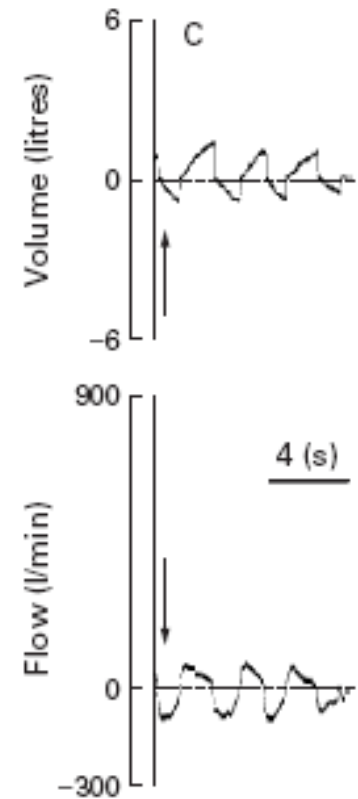
# La toux



Sujet Normal



BPCO



Maladie  
neuromusculaire

# Quels appareils



Chez les patients obstructifs

# BPCO et désencombrement instrumental

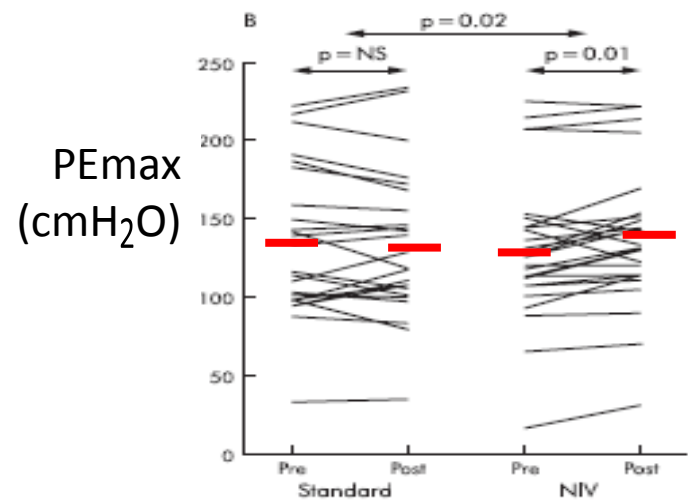
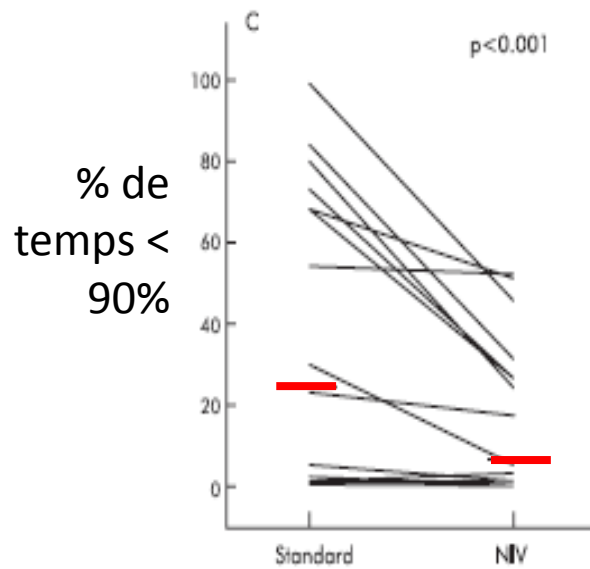
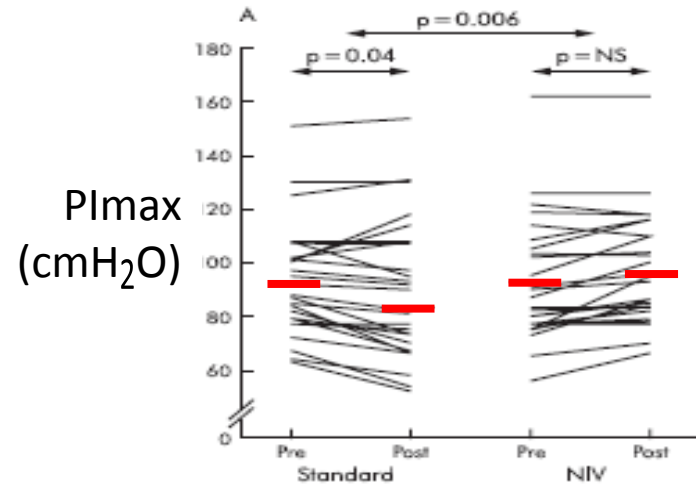
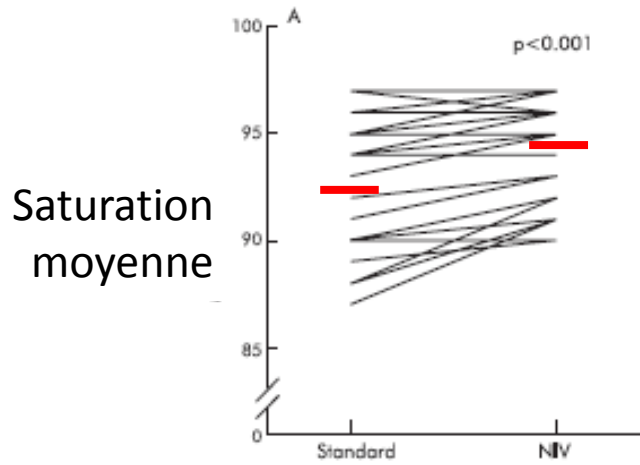
Changes in Lung Volumes, Gas Exchange, Dyspnoea and Quality of Life Scales, and Muscle Strength and Biochemical Parameters Before and After Treatment in the Three Groups.

	Control				IPPB				T-PEP				Difference between the two methods and control group (covariance analysis)	
	Before treatment		At the last treatment		Before treatment		At the last treatment		Before treatment		At the last treatment		IPPB	T-PEP
	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD	Mean	SD	P-value	P-value
Age	70	6			70	9			73	6				
FVC%	63	11	57	14	58	11	67	12	63	11	70	12	<.001	<.001
FEV1%	30	7	28	8	37	9	44	11	31	11	38	11	<.01	<.05
FEV1/FVC	37	5	37	5	48	10	51	12	38	6	43	12	ns	ns
TLC%	130	23	139	20	128	31	117	28	154	31	127	19	<.05	<.001
RV%	208	68	212	62	203	34	171	33	287	75	217	46	ns	<.01
DLCO%	49	18	46	16	54	11	55	12	54	22	56	21	ns	ns
MIP, kPa	5	1	4	1	4	2	5	2	3	2	4	2	<.01	ns
MEP, kPa	5	1	5	1	5	2	6	2	4	2	6	4	ns	<.05
PaO <sub>2</sub> , mmHg	64	8	63	8	66	11	68	6	72	8	74	7	ns	ns
PaCO <sub>2</sub> , mmHg	46	9	46	9	48	6	48	6	45	10	43	9	ns	ns
pH	7	0	7	0	7	0	7	0	7	0	7	0	ns	ns
MRC	3	1	4	1	4	0	3	1	4	0	4	1	<.001	<.05
CAT	27	6	27	6	26	7	18	7	27	6	20	7	<.001	<.05
BCSS	5	2	5	2	6	2	3	1	6	2	4	2	ns	ns
Red cells	4 507 250	281 847	3 938 250	1 420 499	4 644 875	525 462	4 444 625	301 775	4 485 000	365 865	4 548 000	397 043	ns	ns
White cells	8714	1616	8795	1764	8081	1100	8571	689	8670	1254	8344	1461	ns	ns
Lymphocytes	2959	546	2969	634	1849	340	1918	248	2691	925	2435	831	ns	ns
C-r prot	0	0	0	0	0	0	0	0	1	0	0	0	ns	ns
γ-Globul	12	1	13	1	13	2	12	2	12	1	12	1	ns	ns

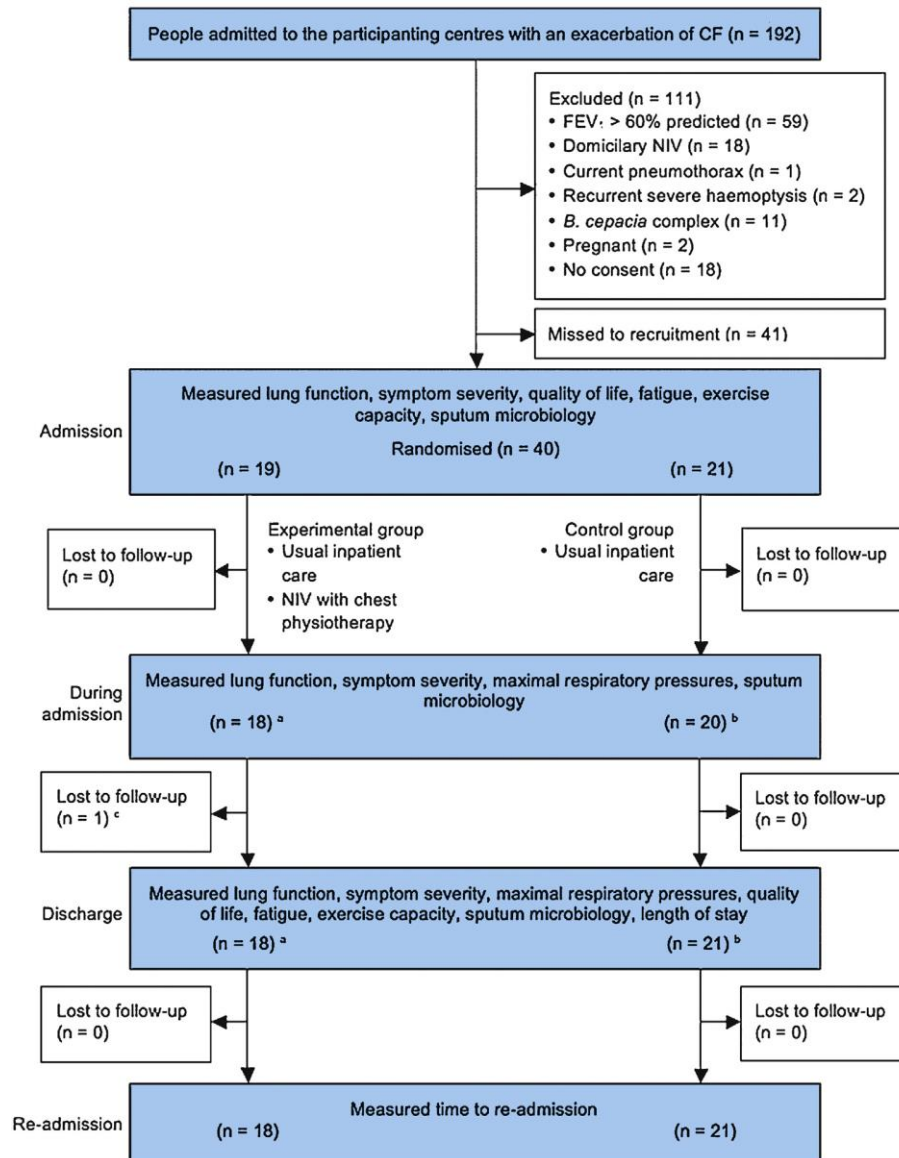
# BPCO et désencombrement instrumental

	IPPB				T-PEP				Difference between IPPB and T-PEP (covariance analysis) P-value
	Before treatment		At the last treatment		Before treatment		At the last treatment		
	Mean	SD	Mean	SD	Mean	SD	Mean	SD	
Age	70	9			73	6			
FVC%	58	11	67	12	63	11	70	12	ns
FEV1%	37	9	44	11	31	11	38	11	ns
FEV1/FVC	48	10	51	12	38	6	43	12	ns
TLC%	128	31	117	28	154	31	127	19	ns
RV%	203	34	171	33	287	75	217	46	ns
DLCO%	54	11	55	12	54	22	56	21	ns
MIP, kPa	4	2	5	2	3	2	4	2	ns
MEP, kPa	5	2	6	2	4	2	6	4	ns
PaO <sub>2</sub> , mmHg	66	11	68	6	72	8	74	7	ns
PaCO <sub>2</sub> , mmHg	48	6	48	6	45	10	43	9	ns
pH	7	0	7	0	7	0	7	0	ns
MRC	4	0	3	1	4	0	4	1	<.05
CAT	26	7	18	7	27	6	20	7	<.01
BCSS	6	2	3	1	6	2	4	2	ns
Red cells	4 644 875	525 462	4 444 625	301 775	4 485 000	365 865	4 548 000	397 043	ns
White cells	8081	1100	8571	689	8670	1254	8344	1461	ns
Lymphocytes	1849	340	1918	248	2691	925	2435	831	ns
C-r prot	0	0	0	0	1	0	0	0	ns
γ-Globul	13	2	12	2	12	1	12	1	ns

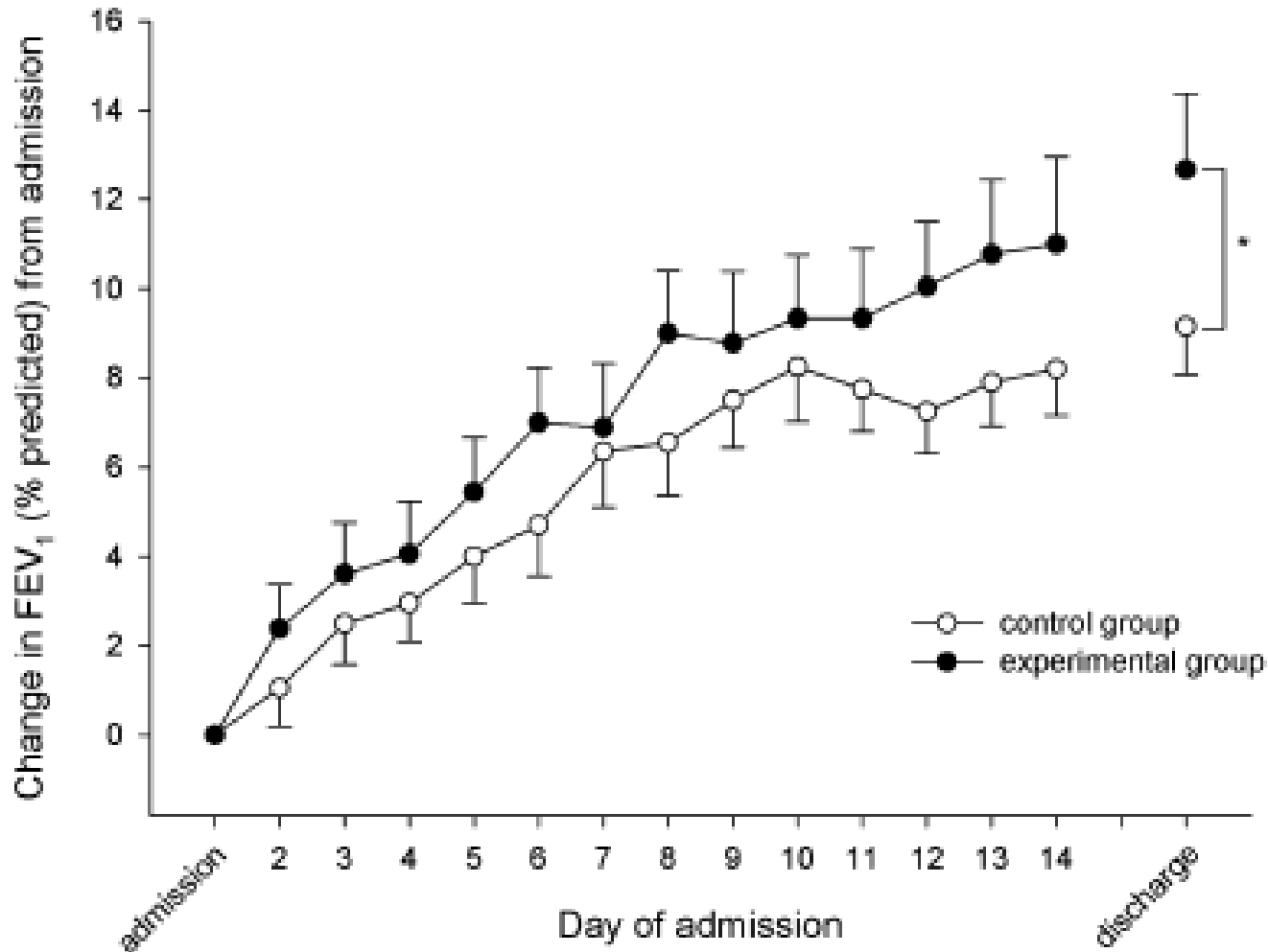
# Mucoviscidose et VNI



# Désencombrement + VNI lors d'une exacerbation chez patient CF

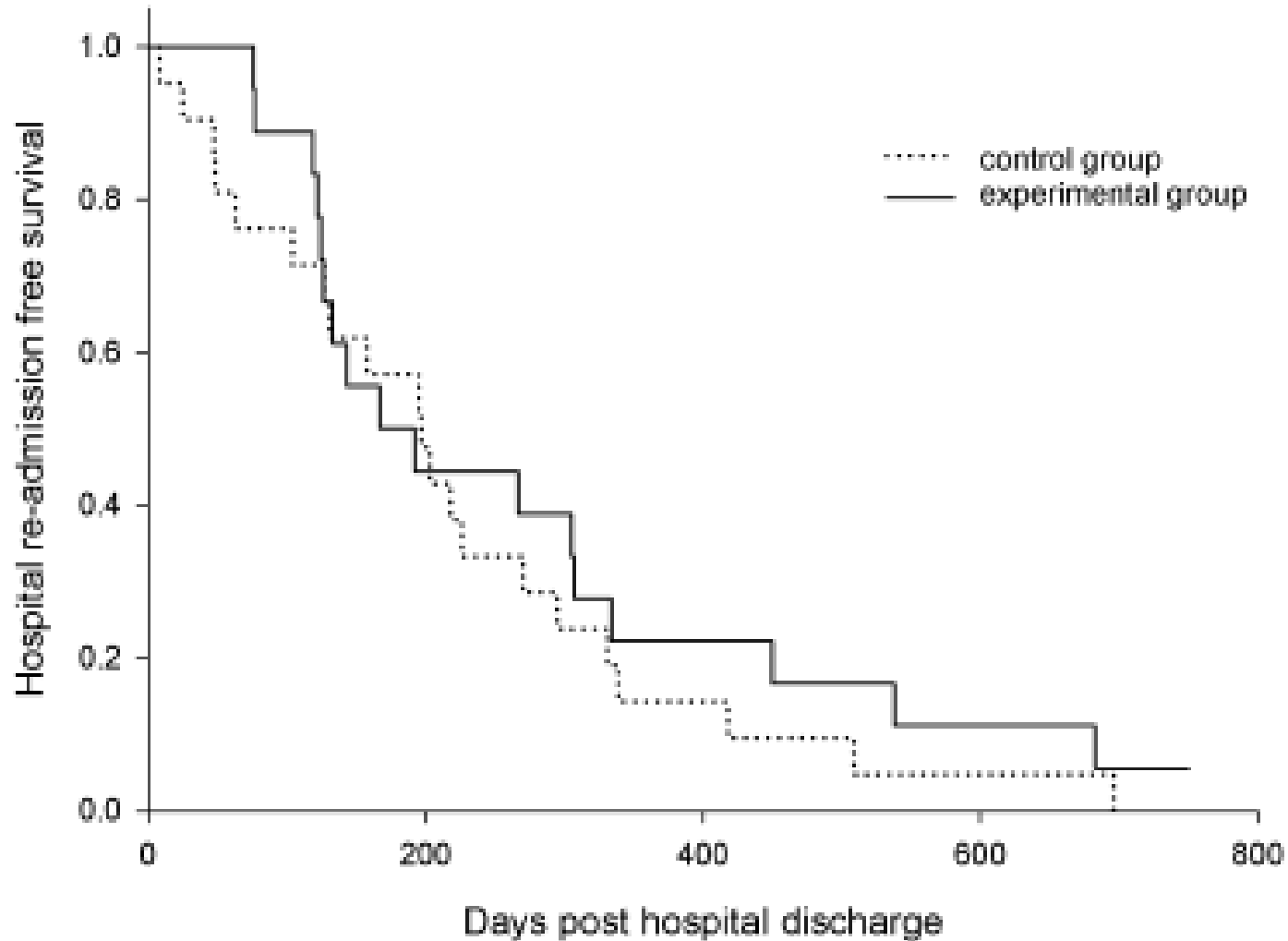


# Désencombrement + VNI lors d'une exacerbation chez patient CF



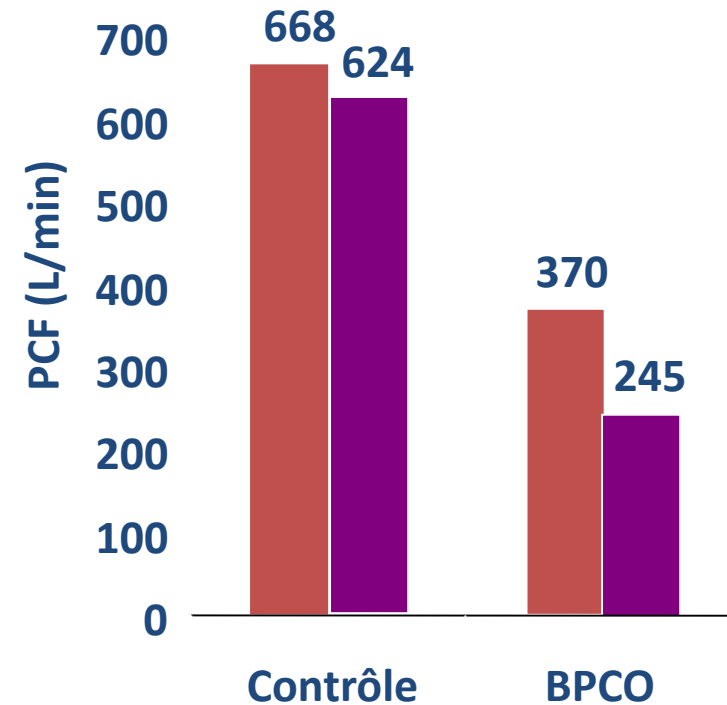


# Désencombrement + VNI lors d'une exacerbation chez patient CF



# Toux assistée chez le sujet sain vs BPCO

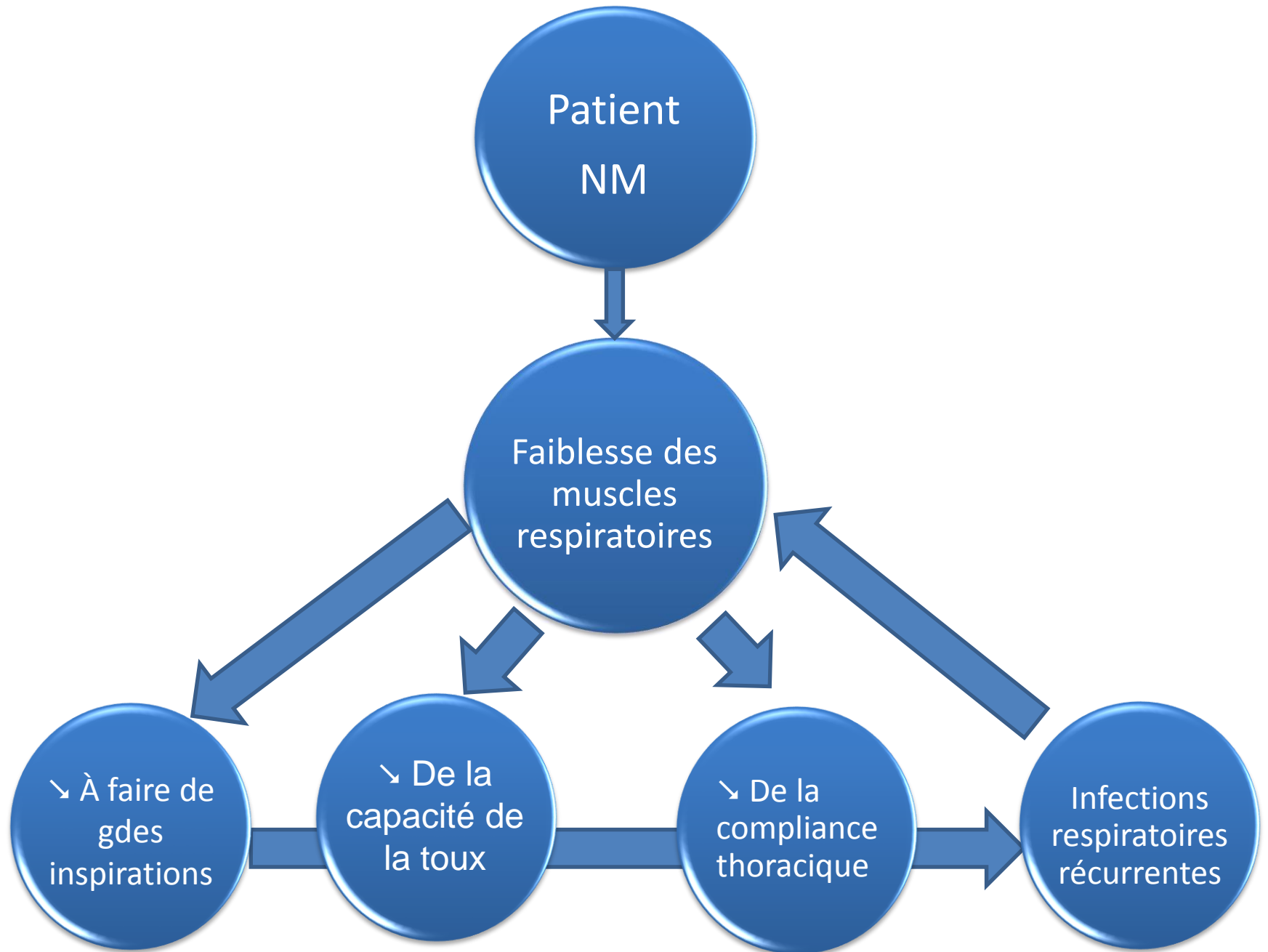
- 8 BPCO vs 9 contrôles sains
- Mesure du PCF durant la
  - toux spontanée
  - toux assistée par Cough-Assist



Sivasothy et al. 2001, Thorax

- Conclusion:  
Meilleur PCF sans Cough- Assist ( $p < 0.05$ )

# Patients restrictifs



# Méthodes de désencombrement

Physiothérapie  
respiratoire

Prise en charge  
médicale optimale

Technique de  
désencombrement

Augmentation  
de la Toux

Traitement  
conventionnel

Exercices  
respiratoires

Pression  
expiratoire  
positive

Appareil à  
oscillation

Recrutement  
alvéolaire  
(bagging)

Intermittent  
positive  
pressure  
breathing  
(IPPB)

Mechanical  
insufflation  
/exsufflation  
"Cough Assist"  
(Philips  
Respironics)  
"NiPPY  
Clearway"  
(B&D  
Electromedical)  
"Pegaso"  
(Dima)

Techniques  
manuelles

Active cycle of  
breathing  
techniques,  
(ACBT)  
Drainage  
Autogène

"PEP mask"  
"Thera-PEP®"

"Flutter®"  
"Acapella®"  
"RC-Cornet™"  
**HFCWO:** "Vest™"  
"SmartVest™"

# Débit de pointe à la toux

- Débit de toux normal entre 360 et 840 l/min

Leiner et al, 1963 Am Rev Respir Dis

- Patient à risque si débit de toux < 160 l/min

Bach et al., 1997, Chest

- Patient SLA avec atteinte bulbaire < 250 l/min

Sancho et al. 2007 AJRRCM

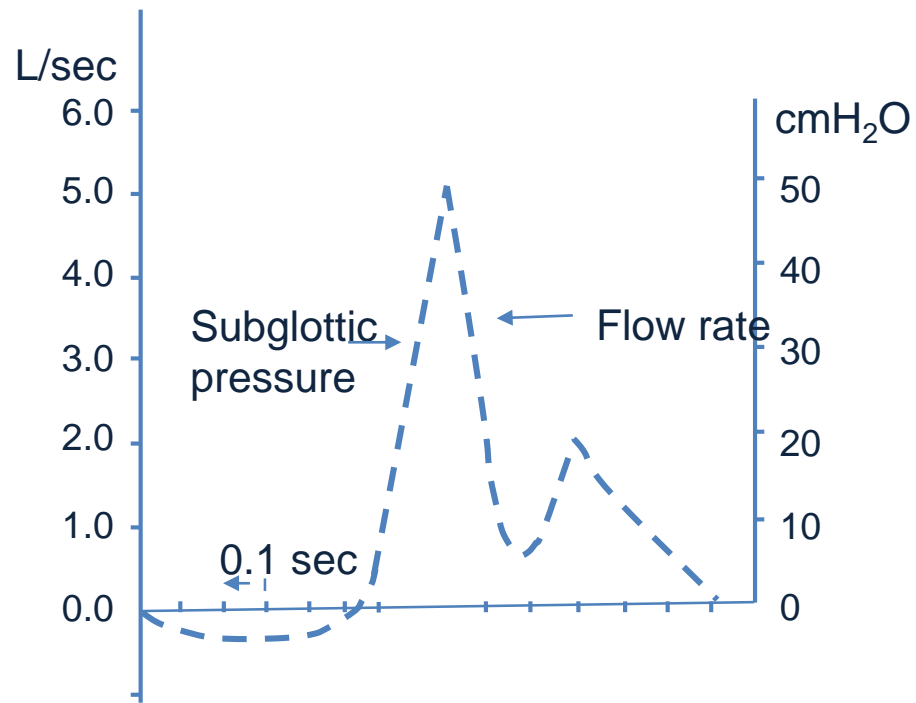


# La toux

vitalweb.fr <https://www.vitalweb.fr/EspacePro/EncycloVNI/videos/1/VIDEOtoux.html>



# Augmentation de la toux

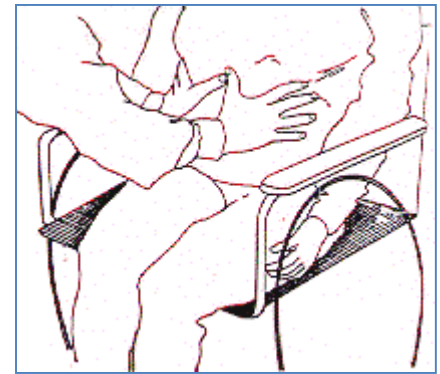
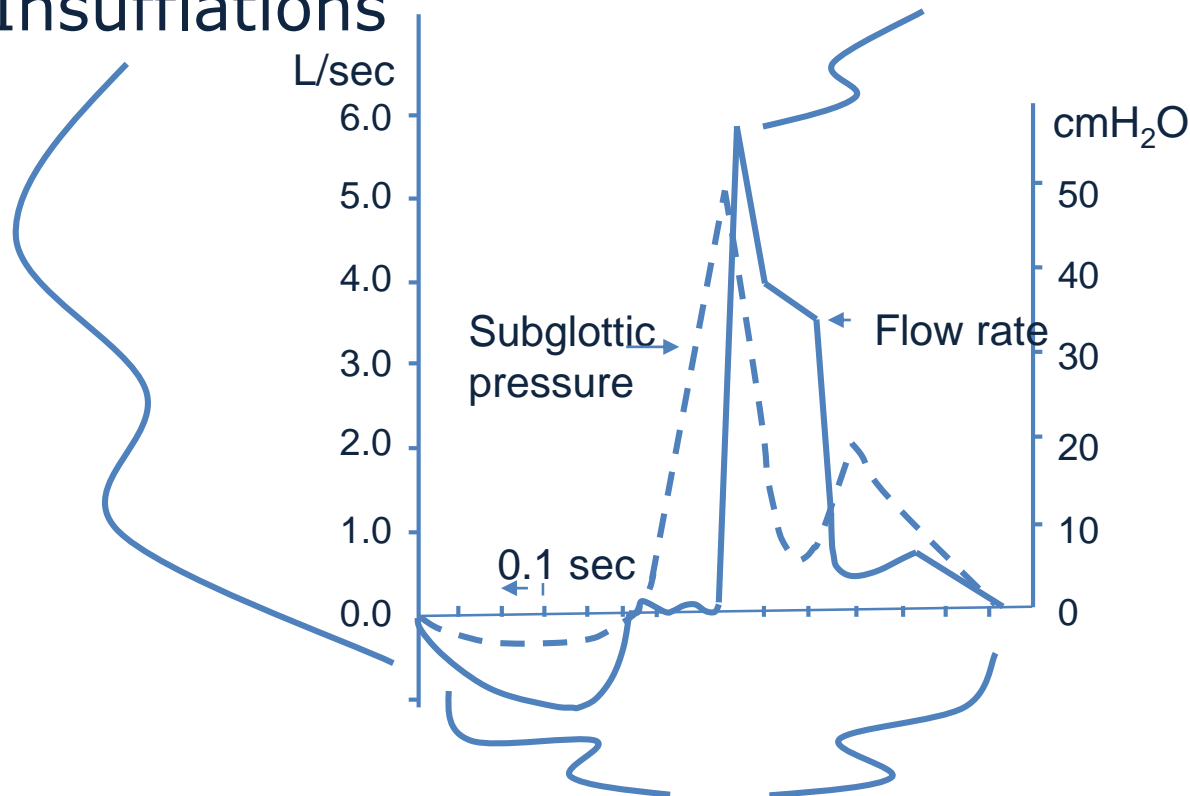




# Augmentation de la toux

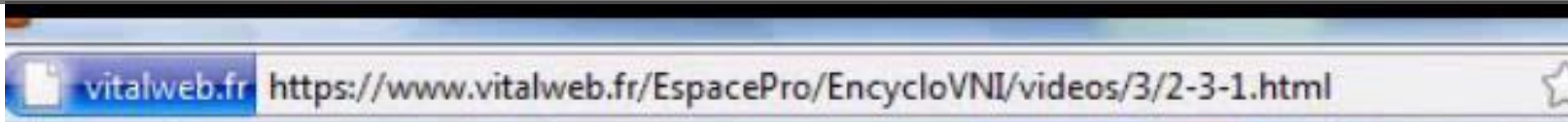
Breath Stacking, IPPB  
Manuel / Mechanical  
Insufflations

Assistance à la toux manuelle



Mechanical Insufflation / Exsufflation

# Bagging



<https://www.vitalweb.fr/EspacePro/EncycloVNI/>

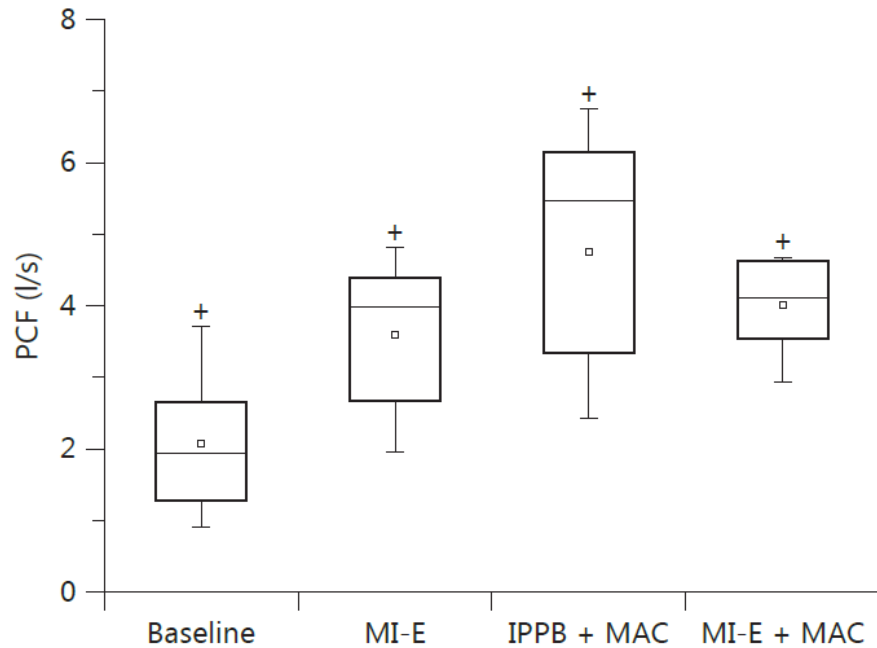
# Ventilateur VS bagging

	Ventilator ( <i>n</i> = 27)	Resuscitator Bag ( <i>n</i> = 25)	<i>P</i>
Age, y	25.3 ± 5.1	24.7 ± 5.7	.60
BMI, kg/m <sup>2</sup>	17 ± 6.5	17.1 ± 6.6	.96
FVC, mL	809 ± 555	807 ± 495	.99
FVC, % predicted	17 ± 10	16 ± 8	.95
P <sub>E<sub>max</sub></sub> , cm H <sub>2</sub> O	18.3 ± 10.9	17.7 ± 7.5	.82
CPF, L/min	132 ± 55	125 ± 52	.68
CPF <sub>MAC</sub> , L/min	210 ± 55	205 ± 52	.74
NIV tidal volume, mL	716 ± 88	724 ± 92	.75
MIPPV use, <i>n</i>	19	16	NA
Vent-free time, h	7.2 ± 6.3	7 ± 5.5	.90

	Ventilator	Resuscitator Bag	<i>P</i>
Able to perform air stacking, <i>n</i> (%)	24/27 (89)	22/25 (88)	NA
Insufflations to maximal insufflation capacity, <i>n</i>	2.6 ± 0.6	1.8 ± 0.6	<.001
CPF <sub>AS</sub> , L/min	199 ± 48	186 ± 50	.33
Maximal insufflation capacity, mL	1,481 ± 477	1,344 ± 520	.33
Expected expired volume, mL	1,770 ± 404	NA	NA
Ventilator leak, mL	289 ± 468	NA	NA
P <sub>E<sub>maxAS</sub></sub> , cm H <sub>2</sub> O	28 ± 10	26 ± 9	.45

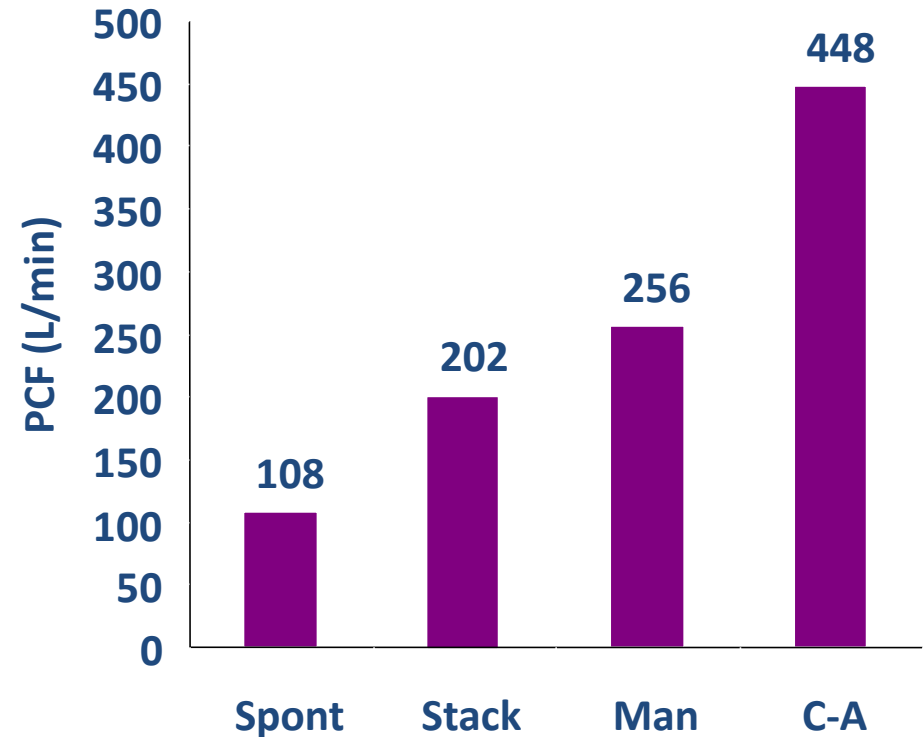
# Comparaison des débits à la toux avec différentes techniques de toux assistée

- 18 patients restrictifs



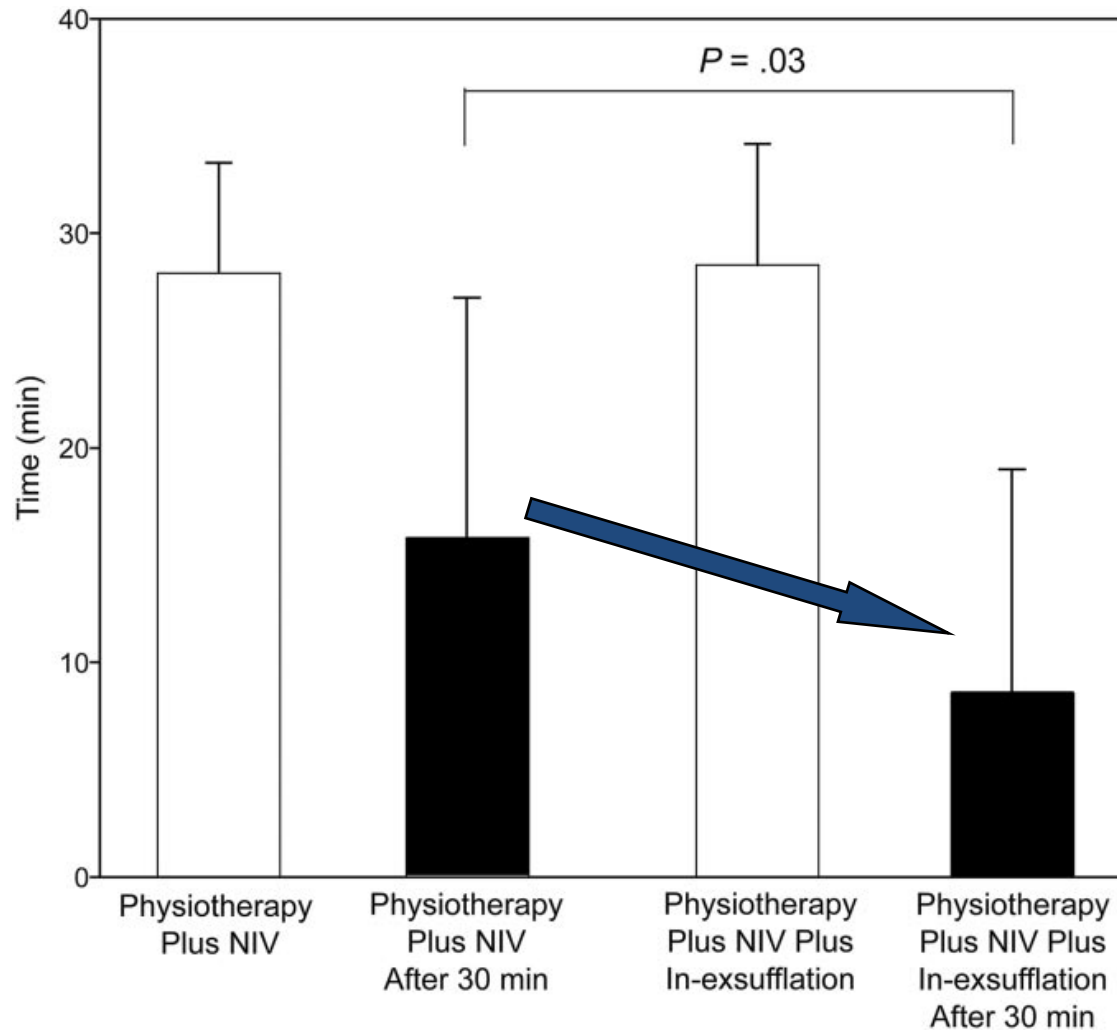
Lacombe; Respiration 2014

- 21 patients restrictifs



Bach; Chest 1993

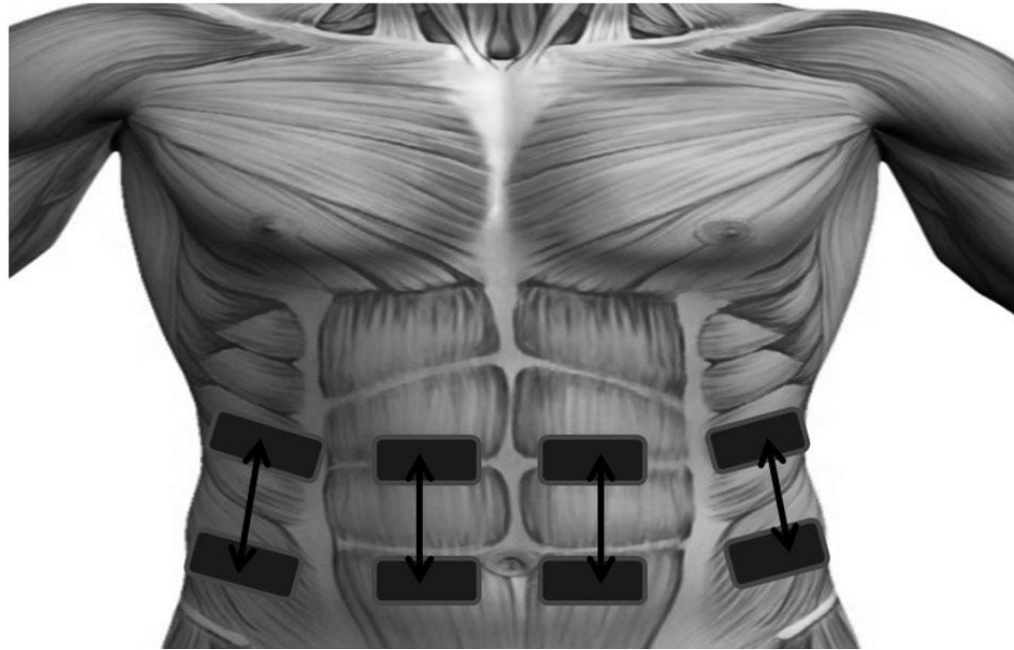
# Comparaison des débits à la toux avec différentes techniques de toux assistée



# Exemple pratique



# Le Futur?



Assessment Session	FVC (L)		PEF (L/s)	
	Unstimulated	Stimulated	Unstimulated	Stimulated
A0	1.60	1.84	1.97	2.18
A7	1.99	2.28	2.00	2.39

# Conclusion

