Unit II – Problem 4 – Physiology Lab: Dynamic Spirometry

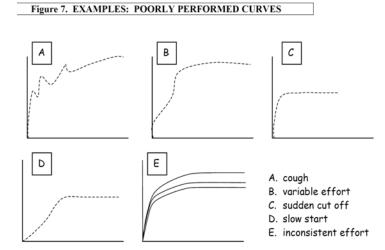
Expiratory Flow

nspiratory Flow

TLC



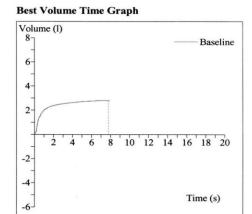
- **FEV₁:** it is the volume of air that the patient is able to breath out in the 1st second of forced expiration.
- **FVC**: it is the total volume of air that the patient can exhale forcibly in one breath.
- **FEV₁/FVC ratio:** this ratio is expressed as a percentage.
- **Peak flow**: it is the volume of air that the patient is able to breath out in first 1000th of a second of forced expiration.
- What are the steps to be taken when patient undergoes examination with spirometry (for measurement of FEV₁ and FVC):
 - Take as large breath of air as possible.
 - Put the filter into your mouth ensuring there are no leaks at the sides of your mouth.
 - Attach a nose clip to prevent air leakage.
 - Blast as quickly as possible and for as long as possible.



- The normal curve:

• Volume-time:

- ✓ The vertical scale indicates total volume (l) the patient has blown out.
- ✓ The horizontal scale indicates the total time (s) the patient has been blowing out for.
- ✓ <u>Note</u>: the initial part of the curve which is steep followed by a gradual flattening of the curve.





Forced expiration

Lung Volume

Inspiration

Inverted

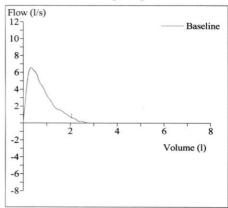
Inspiration

RV

• Flow-volume loop:

- ✓ The vertical scale indicates litres of air breathed out per second (L/s) at that moment in time.
- ✓ The horizontal scale indicates total volume expired (L).
- ✓ <u>Note</u>: the sharp peak at the beginning of the curve followed by an initially sharp trough that gradually flattens out.

Best Flow Volume Loop Graph



- Normal values:

- $FEV_1 > 80\%$ predicted.
- **FVC** > 80% predicted.
- **FEV**₁/**FVC** \geq 70% predicted.

- Spirometry interpretation: obstructive vs. restrictive lung diseases

• Obstructive lung disease:

- ✓ FVC: normal or \downarrow
- \checkmark <u>FEV</u>₁: \downarrow
- ✓ FEF 25-75%: ↓
- ✓ FEV₁/FVC ratio: ↓
- ✓ TLC: normal or ↑

• Restrictive lung disease:

- ✓ FVC: ↓
- ✓ $FEV_1: \downarrow$
- ✓ FEF 25-75%: normal or \downarrow
- ✓ FEV₁/FVC ratio: normal or ↑
- ✓ TLC: ↓

• Or to make interpretation more easy:

- ✓ Look to FEV₁/FVC ratio:
 - ❖ *If it is decreased* = obstructive lung disease.
 - ❖ *If it is normal or increased* =
 - > Restrictive lung disease (if other values are decreased).
 - ➤ Normal (if other values are normal).

- Measurements:

| Severity of obstruction | | |
|---------------------------------|---|--|
| Severity | Post-bronchodilator FEV ₁ (% of predicted value) | |
| Mild airflow obstruction | > 80% | |
| Moderate airflow obstruction | 79-50% | |
| Severe airflow obstruction | 30-49% | |
| Very severe airflow obstruction | < 30% | |



| Severity of restriction | | |
|-------------------------|----------------|--|
| FVC | % of predicted | |
| Mild | 65-80% | |
| Moderate | 50-65% | |
| Severe | < 50% | |



Asthma vs. COPD:

Asthma: it is a reversible obstructive lung disease (spontaneously with or treatment) in which susceptible individuals hypersensitivity have reaction and increase in airway response due to different stimuli.

| | COPD | Asthma |
|--|-------------------------|----------|
| Smoker or ex-smoker | Nearly all | Possibly |
| Symptoms under the age 35 | Rare | Often |
| Chronic Productive Cough | Common | Uncommon |
| Breathlessness | Present and progressive | Variable |
| Night time waking with breathlessness and or wheeze | Uncommon | Common |
| Significant diurnal or day to day variability of symptoms | Uncommon | Common |

• **COPD**: airflow obstruction is usually progressive, not

fully reversible and does not change markedly over several months. The disease is predominantly caused by smoking (20 pack years is considered a significant factor for developing COPD).

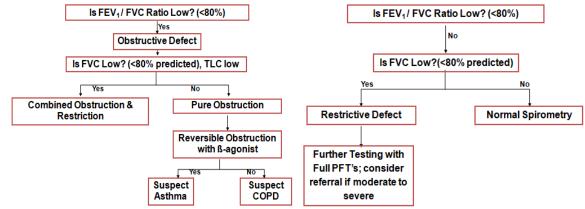
- Bronchodilator reversibility test:

• 400 mcg Salbutamol is administered via large volume spacer and spirometry repeated after 10-15 minutes. Before taking bronchodilator test, the patient should stop short acting β₂-agonists for 6 hours.

• Results:

- ✓ An FEV₁ that increases by < 400 mls = COPD
- ✓ An FEV₁ that increases by > 400 mls = asthma
- ✓ If FEV_1/FVC ratio increases more than 12% = reversible asthma.

- Diagnostic flow diagrams for obstructive vs. restrictive lung diseases:



- Flow-volume curve:

- **Normal:** starts Forced Expiratory with lung volume of 7 L.
- **Obstructive**: starts with lung volume of 8.5 L and ends with high RV.
- **Restrictive:** stars at low volume of 4.5 L and ends with low RV.

