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# Disease <sup>1</sup>Children's Mercy Kansas City; <sup>2</sup>UMKC School of Medicine

# **Oscillometry in Term Neonates Without Respiratory** Anna Nelson M.D.<sup>1, 2</sup>, Cheri Gauldin R.N.<sup>1</sup>, Brooke Smith R.R.T.<sup>1</sup>, Venkatesh Sampath M.D.<sup>1, 2</sup>, Winston Manimtim M.D.<sup>1, 2</sup>

## Background

•Oscillometry is a bedside tool that measures the reactance of the pulmonary parenchyma and resistance of the airways

•We sought to establish normative standards of oscillometry in term neonates without respiratory disease to better characterize Bronchopulmonary Dysplasia ( BPD), endotypes in the future.

•BPD can be classified as parenchymal, airway or pulmonary vascular disease •We hypothesize that oscillometry could help establish whether a neonate has parenchymal or airway disease.

•The Tremoflo N-100 is an oscillometer specifically calibrated for neonates.

## Methods

- Inclusion criteria:
  - •Gestational age ≥36 weeks, ≤28 days of age, in room air
- Three to five measurements, 30 seconds each, were obtained per participant
- The measurements were averaged by the device, which then calculated the coefficient of variation between measurements in the same participant and coherence of the signal

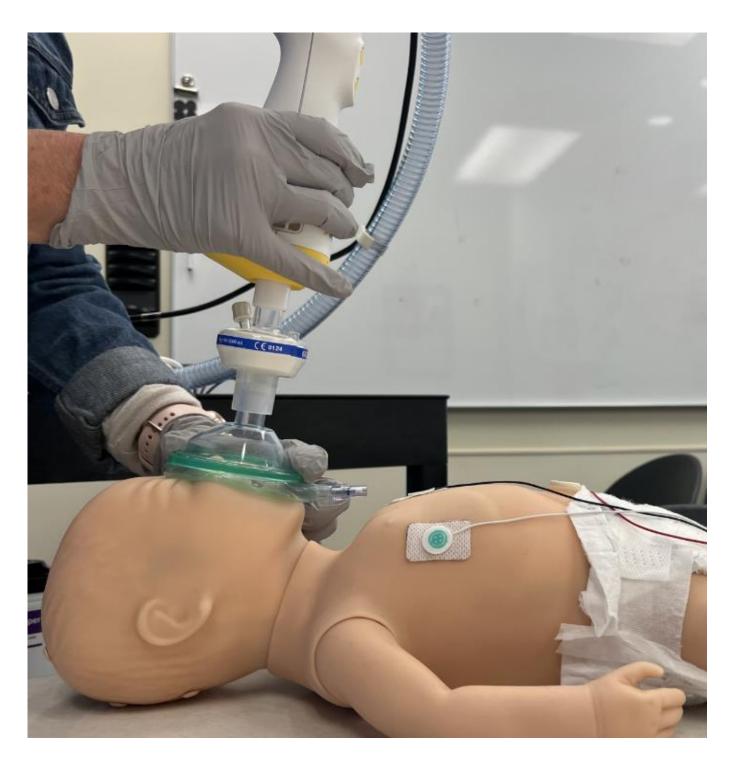


Figure 1. Testing set-up: Neonates are tested in their crib, laying supine in a neutral sniffing position, head midline, with their arms swaddled for comfort.

Demographics (n=13)
Race, (%)
White
Black
Hispanic
Male Sex, (%)
Vaginal Delivery, (%)
Gestational Age, weeks (mean)
Birth Weight, grams (mean)
Birth Length, cm (mean)
Age at test, days (mean)

69.2%

15.4%

15.4%

61.5%

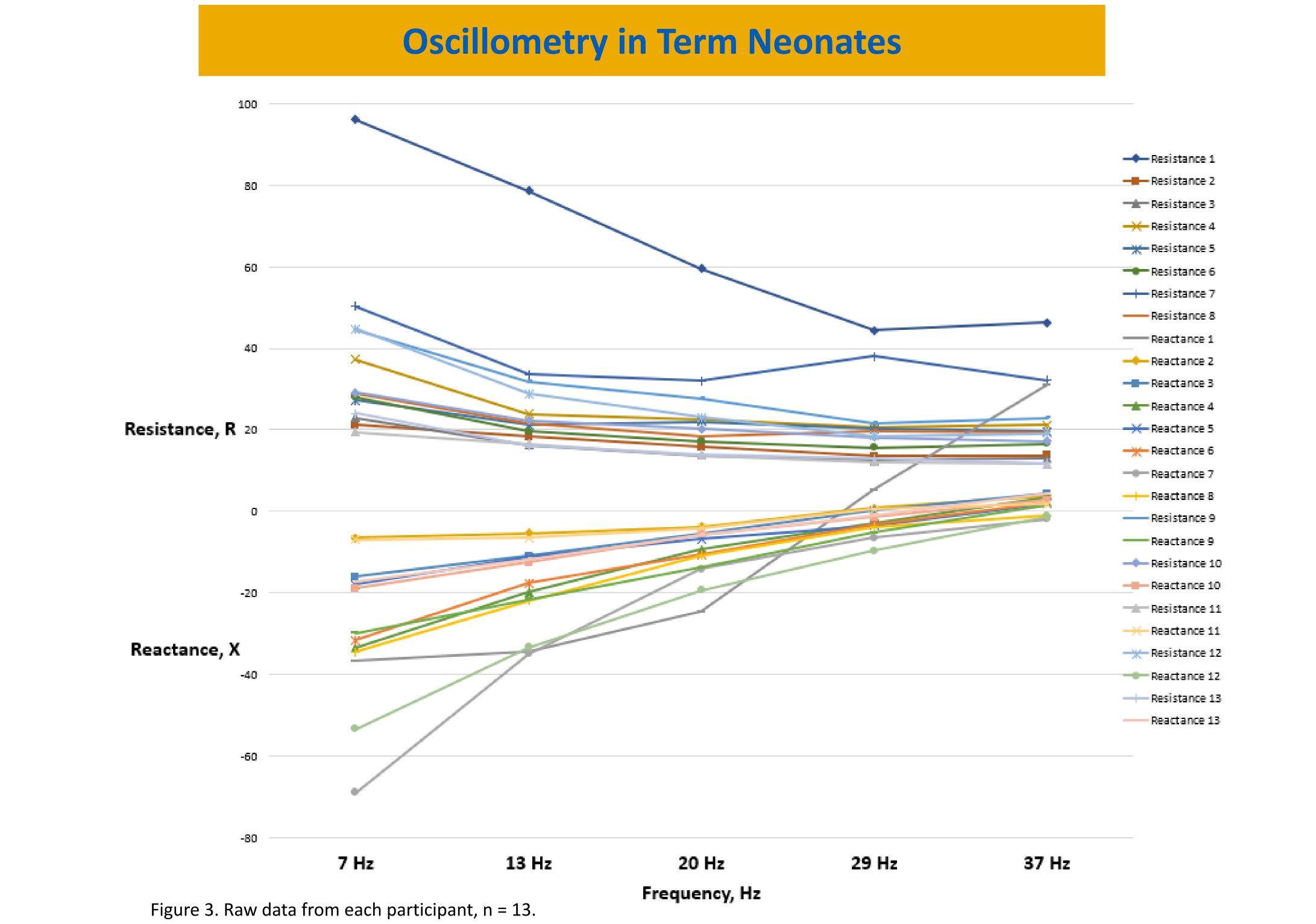
69.2%

3175

50.5

Figure 2. Demographics for the participants.







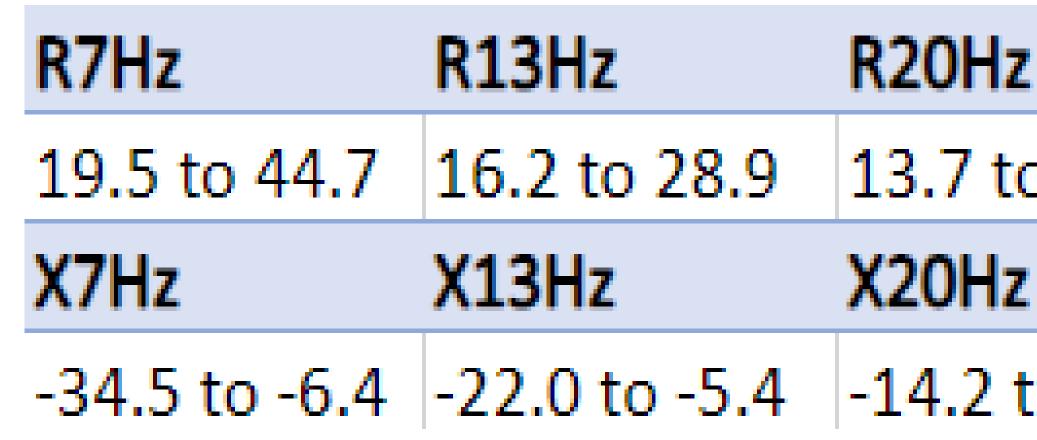


Figure 4. Range of Resistance, R, and Reactance, X, at each frequency, excluding the outliers.

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Z	R29Hz	R37Hz
o 27.6	12.1 to 21.7	11.6 to 22.9
Z	X29Hz	X37Hz



**The University of Kansas** 

Participant	CV%	Coherence
1	26.15	0.42
2	9.36	0.84
3	18.94	0.57
4	n/a	0.29
5	25.94	0.47
6	11.85	0.70
7	27.48	1.00
8	11.00	0.90
9	15.29	1.00
10	5.07	0.80
11	n/a	0.90
12	10.39	1.00
13	27.75	1.00

Figure 5. The Coefficient of Variation (CV%) and Coherence for each participant.

## Discussion

• Oscillometry provides consistent and reliable data for evaluating the pulmonary function of term, healthy neonates based on a coefficient of variation <30%. • The device had some difficulty with calibration until participant 8, then demonstrated more consistent coherence thereafter.

 No clear relationship between participants length and R or X. • Similar results from the study by Klinger et al that utilized the Tremoflo C-

• The next step is to utilize oscillometry in participants with BPD.

## References

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• King GG, Bates J, Berger KI, et al. Technical standards for respiratory oscillometry. *Eur Respir J*. 2020;55(2):1900753. Published 2020 Feb 27. doi:10.1183/13993003.00753-2019

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