

HELIOS® PERSONAL OXYGEN SYSTEM

## BREATHE EASIER

### Fact No. 1

The *HELIOS*® system has promoted better health, quality of life, and increased compliance for **more than 125,000 oxygen therapy patients.**





## Fact No.2

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COPD may limit a person's ability to work and **reduce his or her independence**, sexual activity, social activities and self-esteem, which frequently may result in depression.<sup>2</sup>



## Ambulatory Oxygen Therapy Can Improve Patient Quality of Life and Health

Ambulatory oxygen therapy can improve patients' mobility, reduce fatigue, improve energy levels and improve their quality of life.

- Oxygen therapy can extend life expectancy and improve emotional outlook for COPD patients.<sup>3</sup>
- Mobility and 24-hour oxygen therapy together contribute to improved quality of life.<sup>4</sup>
- COPD patients with a high quality of life may have fewer hospitalizations than other patients.<sup>3</sup>
- Improved mobility may improve socialization and compliance.
- Pulmonary rehabilitation has been shown to decrease depression and anxiety among COPD patients.<sup>5</sup>
- Long-term oxygen therapy and patient support groups are the cornerstones of supportive therapy in pulmonary rehabilitation programs.<sup>6</sup>

*"Our research studies have shown that providing supplemental oxygen to COPD patients enhances their exercise tolerance substantially. It's important that oxygen equipment be lightweight so that a patient's ability to ambulate is enhanced. More active patients have a better quality of life and may have a better long-term prognosis."*

*Richard Casaburi, PhD, MD  
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and Education Institute  
Torrance, California*

2. Paul Lehnert, Palo Alto Medical Foundation, [www.pamf.org](http://www.pamf.org), August 16, 2002.

3. Fan, et al. Ambulatory Care Quality Improvement Project Investigators. Using quality of life to predict hospitalization and mortality in patients with obstructive lung diseases. *Chest*. 2002;122(2):429-436.

4. Petty TL. Home oxygen—a revolution in the care of advanced COPD. *Med Clin North Am*. 1990;74(3):715-729.

5. Smoller JW, Pollack MH. Panic, anxiety, dyspnea, and respiratory disease. Theoretical and clinical considerations. *Am J Respir Crit Care Med*. 1996;154(6):6-17.

6. Petty TL. Supportive therapy in COPD. *Chest*. 1998;113(4 Suppl):256S-262S.



#### Fact No.4

Medicare expenses for COPD beneficiaries were **nearly 2.5 times higher** than expenditures for beneficiaries with any other clinical diagnosis.<sup>8</sup>

## HELiOS Can Help Keep Healthcare Costs Down

Ambulatory oxygen therapy can reduce patients' dependency on additional health-care services and help reduce patient costs.

**The HELiOS system can provide patients who use supplemental oxygen more than \$800 in annual savings, on average, through fewer hospitalizations and physician and emergency room visits.<sup>9</sup>**

- Patients with a high quality of life may have fewer hospitalizations than other patients.<sup>4</sup>
- Long-term oxygen therapy provides well-documented outcomes, including:<sup>10</sup>
  - > Improved tolerance of exercise and other ambulatory activities
  - > Decreased pulmonary hypertension
  - > Improved neuropsychiatric function
  - > Decreased erythrocytosis and polycythemia
  - > Reduced morbidity and mortality

### Economical for patients and homecare suppliers

- The HELiOS oxygen conserving device reduces oxygen waste compared with continuous flow devices.
- Nonelectric operation avoids higher, nonreimbursable electricity costs associated with oxygen concentrators.
- Reduces home oxygen deliveries to as few as eight times per year.

*"Ambulatory oxygen therapy helps patients remain physically active for more of their life, which, typically, means they stay healthier and enjoy better quality of life. Compared to emergency room and other related healthcare costs, ambulatory oxygen systems such as HELiOS provide better and more effective use of healthcare dollars."*

*Steven Zimmet, MD  
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National Association for Medical Direction  
of Respiratory Care (NAMDRC)  
Arlington, Virginia*

8. National Heart, Lung, and Blood Institute Chart Book, 2002.

9. Medicare paid claims (n=2,460) analysis, 2002. Data on file.

10. Guide to Prescribing Home Oxygen, Thomas L. Petty, MD