

## ... 12 good reasons to use the RC-Cornet®

<b>high efficiency</b>	In comparison to other oscillating PEP-devices the RC-Cornet® uses the entire expired air volume to produce pressure- and fluctuation vibrations. The success of the therapy depends on these vibrations, especially for patients with a low expiratory volume (FEV1).
<b>Combi-therapy</b>	The RC-Cornet® Adapter with mouthpiece / with nosepiece combines the RC-Cornet® with standard nebulisers. The combined inhalation and physiotherapy saves time and becomes more effective.
<b>individual settings</b>	With the RC-Cornet® the patient can determine the optimal personal pressure and flow characteristics by turning the mouthpiece. Positions 1&2 create a PEP with added pressure oscillations successfully used in patients with COPD & emphysema. Positions 3 & 4 create a slowly rising pressure with a sudden pressure drop used in patients with bronchiectasis and cystic fibrosis.
<b>mucous mobilisation &amp; collateral ventilation</b>	The RC-Cornet®'s initial position creates a permanent expiratory pressure (PEP) with added pressure oscillations causing a stabilisation and airway enlargement. The constant positive pressure opens the connection between bronchioles and alveolus (collateral ventilation). The added pressure other oscillating respiratory-equipment oscillations reach the alveolus area and activate the surfactant. Therapies with usually don't reach the described constant positive pressure.
<b>sudden pressure drop causing mucus mobilisation</b>	Positions 3 & 4 produce a gradual rising pressure which enlarges the bronchial walls followed by a sudden pressure drop. The chewy mucus cannot follow these fast movements and is shed from the bronchial walls. Other oscillating PEP systems do not produce sudden pressure drops and therefore are less effective at shedding mucous attached to the wall.
<b>position independence</b>	In comparison to other PEP-devices the RC-Cornet® can be used in any position (lying, sitting, etc.).
<b>less hyperventilation</b>	CO2 levels in patients using the RC-Cornet® are only marginally reduced due to the fact that the entire expired air volume is channelled through the valve hose. Whereas other devices leave expiratory air unused and cause hyperventilation.
<b>less bronchial infections</b>	Based on a randomised prospective study the RC-Cornet® therapy reduces the amount of infections and the need for antibiotics significantly.
<b>reduction of hospitalisation</b>	It is proven that the RC-Cornet® reduces the number of hospitalisations in COPD-patients. (based on a study from 12 to 4 in 2 years in patients with a FEV1 < 1,5l/s).
<b>breathlessness</b>	Studies have proven that the use of the RC-Cornet® reduce the breathlessness (dyspnoe) feeling.
<b>therapy of severe COPD possible</b>	The RC-Cornet® can be used by patients with severe COPD. By withdrawing the mouthpiece 2cm's from the curved tube, oscillations will start at pressures as low as 2cm H2O.
<b>therapy-control</b>	The RC-Manometer-Kit makes it possible to define and control PEP-pressures during RC-Cornet® therapy.