

To whom it may concern,

Your patient may fit initial criteria to be eligible for consideration of a **Lung Volume Reduction** procedure through a Regional Advanced Emphysema MDT that could help with their symptomatic breathlessness caused by emphysema.

Please find included all [National Advanced Emphysema Services and MDT contact details](#).



Lung Volume
Reduction Surgery



Zephyr®
Endobronchial
Valve

Lung volume reduction can be performed surgically, by removing sections of emphysematous tissue that does not contribute to gas exchange, and traps air that is a cause of their breathlessness.

It can also be performed by minimally invasive means via a bronchoscope and the insertion of small one-way valves called endobronchial valves. These valves slowly remove the trapped air from the diseased portions of the lung and allow the patient to breath much more effectively and efficiently to reduce their symptoms.¹

These treatment options are recommended by both **GOLD**² and **NICE**³ and can be performed once some initial criteria are met from various tests. NICE guidance in relation to lung volume reduction can be found here:

<https://www.nice.org.uk/guidance/ng115/chapter/Recommendations>



Late in 2020 NHS England recognised the value of such a procedure in the correct population and granted National Commissioning for Lung Volume Reduction by surgery or Endo-Bronchial Valves in adults with severe emphysema (NHS Reference 200806P (1622)).

Lung surgery and lung volume reduction procedures³

1.2.88 Offer a respiratory review to assess whether a lung volume reduction procedure is a possibility for people with COPD when they complete pulmonary rehabilitation and at other subsequent reviews, if all of the following apply:

- they have severe COPD, with FEV1 less than 50% and breathlessness that affects their quality of life despite optimal medical treatment (see recommendations 1.2.11 to 1.2.17)
- they do not smoke or are willing to give up smoking
- they can complete a 6-minute walk distance of at least 140 m (if limited by breathlessness). **[2018]**

1.2.89 At the respiratory review, refer the person with COPD to a lung volume reduction multidisciplinary team to assess whether lung volume reduction surgery or endobronchial valves are suitable if they have:

- hyperinflation, assessed by lung function testing with body plethysmography **and**
- emphysema on unenhanced CT chest scan **and**
- optimised treatment for other comorbidities. **[2018]**

¹Criner, G et al. Am J Resp Crit Care Med. 2018 Nov 1;198(9):1151–1164. ²<https://goldcopd.org/gold-reports/>

³<https://www.nice.org.uk/guidance/ng115/chapter/recommendations#inhaled-combination-therapy>

Please can you review the points above in relation to your patient and refer to one of the centres below, where they will be considered for treatment:

National Advanced Emphysema Services and MDT contact details (status April 2023 by city):

| City | Hospital/Facility | Contact |
|----------------|---|---|
| Birmingham | Queen Elizabeth Hospital Birmingham | Mr Naidu Mr Fallouh Dr Turner |
| Blackpool | Blackpool Victoria Hospital | Mr Purohit Dr Khan |
| Bristol | Bristol Royal Infirmary | Dr Curtis Mr Perikleous |
| Cambridge | Addenbrookes Hospital | Dr Mahadeva |
| Cardiff | University Hospital Wales | Ms Kornaszewska Dr Sabit |
| Coventry | Uni Hospitals Coventry and Warwickshire | Mr Hernandez Dr Ortiz-Comino |
| Hull | Castle Hill Hospital | Mr Tentzeris Mr Crooks |
| Leeds | Spire Leeds Hospital (Private) | Mr Papagiannopoulos |
| Leeds | St James University Hospital | Mr Chaudhuri Dr Hambleton Dr Ellames |
| Leicester | Glenfield Hospital | Mr Rathinam Mr Caruana Dr Panchal |
| Liverpool | Liverpool Heart & Chest Hospital | Dr Mohan Mr Shackcloth |
| London | Guys and St Thomas's | Dr Dewar Mr Okiror Dr Batista |
| London | Royal Brompton Hospital | Dr Shah Prof Hopkinson |
| London | St Bartholomew's Hospital | Mr Waller Mr Tim Batchelor |
| London | St George's Hospital | Mr Vaughan Dr Ruickbie |
| London | The Harley Street Clinic (Private) | Prof Shah |
| London | University College London Hospital | Dr Thakrar Dr Kay Roy |
| Manchester | Wythenshawe Hospital | Dr Barraclough Mr Granato |
| Middlesbrough | James Cook University Hospital | Dr Sathyamurthy Mr Dunning |
| Norfolk | Norfolk and Norwich University Hospitals | Mr Kouritas Dr Hand |
| Nottingham | City Hospital Nottingham | Dr Kemp Dr Binnion Mr Burnside |
| Oxford | The John Radcliffe Hospital | Ms Belcher Dr Moore |
| Oxford | The Manor Hospital (Private) | Ms Belcher |
| Scotland | Golden Jubilee National Hospital | Mr Kirk Mr R Bilancia Mr Kostoulas Dr Anderson Dr Bayes |
| Sheffield | Northern General Hospital | Miss Tenconi Mr Rao |
| Southampton | Uni Hospital Southampton NHS Foundation Trust | Mr Alzetani Dr Havelock |
| Staffordshire | Royal Stoke Hospital | Miss Srinivasan Dr Haris Mr Ghosh |
| West Yorkshire | Nuffield Health, Leeds Hospital (Private) | Mr Papagiannopoulos Mr Milton |
| Wolverhampton | New Cross Hospital Heart and Lung Centre | Dr Ejiofor Dr Habib |

Risk Statement: Complications of the Zephyr Endobronchial Valve treatment can include but are not limited to pneumothorax, worsening of COPD symptoms, hemoptysis, pneumonia, dyspnea and, in rare cases, death. **International Brief Statement:** The Zephyr® Endobronchial Valve is an implantable bronchial valve intended to control airflow in order to improve lung functions in patients with hyperinflation associated with severe emphysema and/or to reduce air leaks. The Zephyr Valve is contraindicated for: Patients for whom bronchoscopic procedures are contraindicated; Evidence of active pulmonary infection; Patients with known allergies to Nitinol (nickel-titanium) or its constituent metals (nickel or titanium); Patients with known allergies to silicone; Patients who have not quit smoking. Use is restricted to a trained physician. Prior to use, please reference the Zephyr Endobronchial System Instructions for more information on indications, contraindications, warnings, all precautions, and adverse events.

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¹Criner, G et al. Am J Resp Crit Care Med. 2018 Nov 1;198(9):1151–1164. ²<https://goldcopd.org/gold-reports/>

³<https://www.nice.org.uk/guidance/ng115/chapter/recommendations#inhaled-combination-therapy>