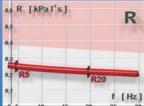
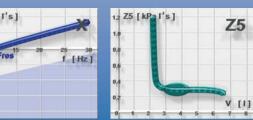


volume are within the predicted normal range.



Total Respiratory Resistance **R5** is within the predicted normal range, **below** the rechatched abnormal level. The Resistance Spectrum **R(f)** is independent of frequency. Dista Capacitive Reactance **X5** is within the normal range (**higher** than the blue coloured area). Responding Frequency Fres is normal.



Minimal variability of Impedance Z5 during tidal breathing and normal expiratory reserve volume during the VC-manoeuvre before airway closure (closing volume) are characteristic for a normal lung function.

Normal Lung Function



Impulse Oscillometry

Typical Curves in Health and Disease

Parameter Definition

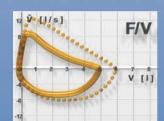
Z5 = Amplidude of Respiratory Impedance

R5 = Total Respiratory Resistance

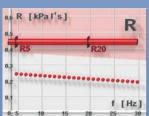
R20 = Proximal Respiratory Resistance

X5 = Distal Capacitive Reactance

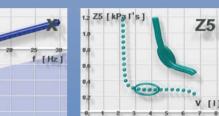
Fres = Resonant Frequency



The expiratory portion of the curve i



The Total Respiratory Resistance R5 is high and within the abnormal range. The Resistance Spectrum R(f) is independent of frequency. I.e. Proximal Respiratory Resistance R20 is similar to Total Respiratory Resistance R5. Distal Capacitive Reactance



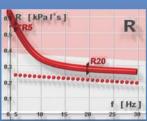
There is a large variability and an increased mean value of Impedance Z5 during tidal breathing. The expiratory reserve volume of the VC-manoeuvre may be limited or normal.



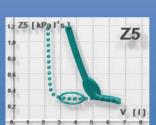




The shape of the curve is similar to that of proximal obstruction, but is normally more exaggerated. When airway collapse is a feature, the expiratory portion of the curve shows a very pronounced concave appearance.



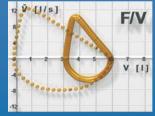
Total Respiratory Resistance R5 is within the red coloured abnormal range. The Resistance Spectrum R(f) is frequency dependent, becoming less at higher frequencies Proximal Respiratory Resistance R20 is considerably lower than R5. Distal Capacitive Reactance X5 is reduced into the abnormal range and Resonant Frequency Fres is shifted to the right, i.e. towards higher frequencies.



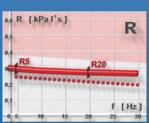
There is a large variability of Impedance 25 during tidal breathing, however its mean value may be close to normal. There is considerable reduction in the expiratory reserve during the VCmanoeuvre.



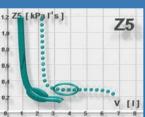




The curve is of normal shape, however Vital Capacity **VC** is considerably



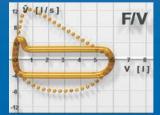
Total Respiratory Resistance **R5** is within the normal range. The Resistance Spectrum **R(f)** is independent of frequency. Only in severe impairments, Distal Capacitive Reactance **X5** is reduced and within the abnormal range and Resonant Frequency **Fres** is shifted to the right to a higher value. The reduced Vital Capacity **VC** in the **Z5** impedance graph may be better suited to indicate the presence of pulmonary restriction.



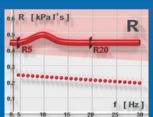
There is little variability of Impedance Ziduring tidal breathing. Vital Capacity V

Pulmonary Restriction

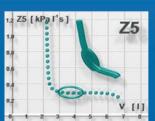




The curve shows a typical plateau in both the inspiratory and expiratory parts of the Flow Volume Curve.



The Total Respiratory Resistance R5 and the Proximal Respiratory Resistance R20 are both high and within the abnormal range. The Resistance Spectrum R(f) is independent of frequency, rarely a peak can be observed on the Resistance Spectrum. The Reactance Spectrum X(f) may be within the normal or the abnormal range, however, Extra Thoracic Airway Obstruction produces a typical plateau in the normally continuous reactance curve. The plateau is normal for children below 4 years of age.



There is a high variability of Impedance **Z5** during tidal breathing with an increased mean value.



