





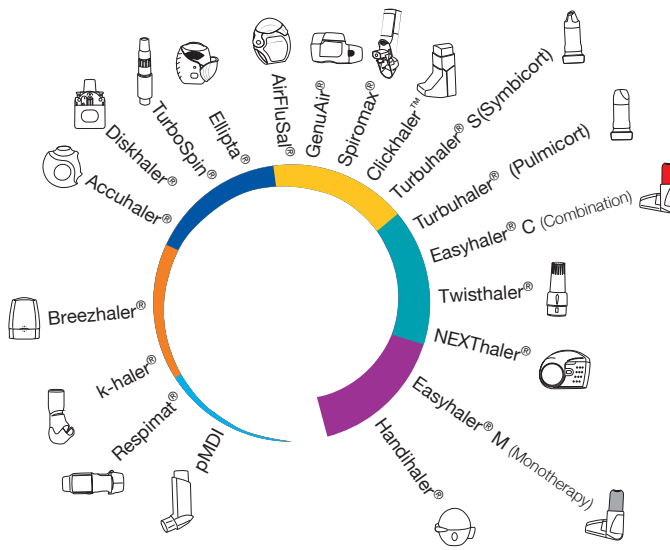
















Inhaler Resistance Range

-  **High**
-  **Med High**
-  **Medium**
-  **Med Low**
-  **Low**
-  **pMDI**




















International

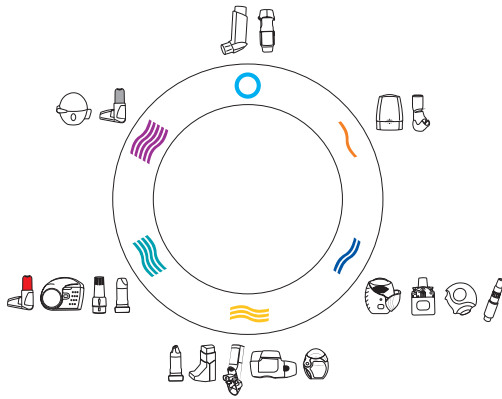
- Handihaler® 
- Easyhaler® 
- NEXThaler® 
- Twisthaler® 
- Turbuhaler® 
- Turbuhaler®, Flexhaler® 
- Clickhaler™ 
- RespiClick®, Spiromax® 
- Novolizer®, Genuair®, Pressair® 
- AirFluSal® 
- Ellipta® 
- TurboSpin® 
- Diskhaler® 
- Diskus® 
- Breezhaler®, Aerolizer®, Neohaler® 
- k-haler® 
- RespiMat® 

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Icon	Product	Icon	Product	Device Resistance
	*Handihaler®		AirFluSal®	
	*Easyhaler®		Ellipta®	
	NEXThaler®		TurboSpin®	
	Twisthaler®		*Diskhaler®(4)	
	*Turbuhaler® P		*Accuhaler®	
	Turbuhaler® S		*Breezhaler®	
	*Clickhaler™		k-haler®	
	Spiromax®		Respimat®	
	*GenuAir®			

Please Note:
 All trademarks and product names are the property of their respective owners, see IFU booklet for details.
 *Indicates device specific adaptor is available, see IFU booklet.



Assessing inspiratory flow rate for clinical efficacy:

Select appropriate resistance setting, inhale through meter, assess achieved flow rate.

For DPIs values between 30-90 L/min are generally associated with clinical efficacy.

For pMDIs values between 20-60 L/min are preferred.

For Handihaler 20 L/min is associated with clinical efficacy.

Bibliography:

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4. Sanders, M. J. (2017). Guiding Inspiratory Flow: Development of the In-Check DIAL G16, a Tool for Improving Inhaler Technique. *Pulmonary medicine*, 2017.
5. Mahler, D. A. (2017). Peak inspiratory flow rate as a criterion for dry powder inhaler use in chronic obstructive pulmonary disease. *Annals of the American Thoracic Society*, 14(7), 1103-1107.
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