A randomised controlled study of Bronchoscopic Lung Volume Reduction with endobronchial valves for patients with Heterogeneous emphysema and Intact interlobar Fissures: the BeLieVeR-HIFi study

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## **Plain English summary**

The BeLieVeR-HIFi study

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# **Plain English summary**

C hronic obstructive pulmonary disease is a lung condition usually caused by smoking. It is a mixture of bronchitis (airway damage) and emphysema (damage to the lung tissue itself). In emphysema, the lungs become baggy and full of holes, which makes it impossible to breathe out fully. This is called 'gas trapping'. A fibreoptic camera (bronchoscope) can be used to place valves into the airways of the lung. The valves stop air entering the most damaged part of the lung, which makes more space for the remaining healthier lung to function.

Unfortunately, in many patients, lung destruction breaks down the barriers (fissures) between the lobes of the lung. This allows air to get round behind the valves so the treatment does not work. The valves are expensive, so to get the best value from the treatment we need to be able to pick people who will benefit accurately.

We carefully selected 50 patients with severe emphysema whose fissures looked to be intact on computerised tomography scan. Half had valves placed and half did not. Patients and investigators did not know which group they were in. After 3 months, lung function and exercise capacity had improved significantly in the treated group but not in the control group. Two people in the treatment group died before 3 months and one of the control patients was too unwell for further measurements to be made.

This suggests that valve treatment is effective in carefully selected patients with emphysema.

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