

A [cough assist](#) (also called a *mechanical insufflator-exsufflator*) is a vital respiratory support tool for people diagnosed with Pompe disease, especially as muscle weakness progresses. Here's how it helps.

Why It's Needed

Pompe disease weakens the [diaphragm](#) and other [respiratory muscles](#) (including those that control coughing). Because of this, patients often:

- Cannot generate enough force to clear [mucus or secretions](#).
- Are at higher risk for pneumonia, [respiratory infections](#), and [lung collapse \(atelectasis\)](#).

A weak cough means mucus remains in the airways, making it harder to breathe and easier for bacteria to grow.

How the Cough Assist Works

The device helps mimic a natural, strong cough by:

- Inflating the lungs ([insufflation](#)) – the device blows air into the lungs to expand them fully.
- Rapidly reversing airflow ([exsufflation](#)) – it then quickly sucks the air out, simulating the forceful exhalation of a cough.

This cycle can be repeated several times per session to loosen and remove mucus effectively.

Benefits for Pompe Patients

- Improves [airway clearance](#) when natural cough is weak.
- Reduces risk of infection and hospitalization.
- Helps maintain better oxygen and carbon dioxide levels.
- May reduce fatigue during illness by lessening the effort needed to clear airways.
- It can be used daily for airway maintenance and during illness for intensive mucus clearance.

When and How It's Used

- Typically prescribed by a [pulmonologist](#) familiar with [neuromuscular diseases](#).
- It can be used at home, in hospitals, or in clinics.
- Often combined with other supports such as:
 - Bilevel [ventilation \(BiPAP\)](#) for breathing assistance.
 - [Chest physiotherapy](#) or [vest therapy](#) to mobilize secretions.
 - [Humidification](#) and [suctioning](#) if mucus is thick or sticky.

References

1. **Finder JD, et al.** Respiratory care of the patient with Duchenne muscular dystrophy: ATS consensus statement. *Am J Respir Crit Care Med*. 2004;170(4):456–465.
PubMed: <https://pubmed.ncbi.nlm.nih.gov/15302625/>

COUGH ASSIST
(*Mechanical Insufflator-Exsufflator*)



2. **Boentert M, et al.** Practical recommendations for diagnosis and management of respiratory muscle weakness in late-onset Pompe disease. *Int J Mol Sci.* 2016;17(10):1735.
PubMed: <https://pubmed.ncbi.nlm.nih.gov/27763517/>
3. **MedlinePlus Genetics.** Pompe disease. U.S. National Library of Medicine. (continuously updated)
Overview: <https://medlineplus.gov/genetics/condition/pompe-disease/>
4. **Vianello A, et al.** Mechanical insufflation–exsufflation improves outcomes for neuromuscular disease patients with respiratory tract infections. *Am J Phys Med Rehabil.* 2005;84(2):83–88.
PubMed: <https://pubmed.ncbi.nlm.nih.gov/15668554/>
5. **Morrow B, et al.** Mechanical insufflation-exsufflation for people with neuromuscular disorders. *Cochrane Database Syst Rev.* 2013;(12):CD010044.
PubMed: <https://pubmed.ncbi.nlm.nih.gov/24374746/>

Glossary of Terms:

Airway clearance – The process of removing mucus and secretions from the lungs to keep breathing passages open and reduce the risk of infection.

Atelectasis – Collapse of part or all of a lung, often caused by mucus blocking the airways.

BiPAP (Bilevel Positive Airway Pressure) – A noninvasive breathing machine that gives two air pressures: one to help inhale and one to help exhale. It supports weak breathing muscles.

Chest physiotherapy – A technique that uses manual percussion, vibration, or mechanical devices (like a vest) to loosen mucus in the lungs.

Cough assist (mechanical insufflator-exsufflator) – A machine that helps simulate a natural cough by blowing air into the lungs and then quickly pulling it out to clear mucus when respiratory muscles are too weak to do so.

Diaphragm – The main breathing muscle located under the lungs. Weakness of this muscle makes it hard to inhale fully or cough effectively.

Exsufflation – The “exhale” phase of a cough-assist device, when air is rapidly pulled out of the lungs to mimic a strong cough.

Humidification – Adding moisture to the air from a ventilator or breathing device to prevent airway dryness and thick mucus.

Infection (respiratory) – An illness caused by viruses or bacteria affecting the lungs or airways; often more frequent in people with weak cough or limited airway clearance.

Insufflation – The “inhale” phase of a cough-assist cycle, when air is gently pushed into the lungs to expand them fully.

Lung collapse – See *Atelectasis*. Occurs when a portion of the lung does not fill with air properly.

Mucus / Secretions – The thick fluid produced in the airways that traps dust and germs. In Pompe disease, weak muscles make it difficult to cough mucus out.

Neuromuscular disease – A group of conditions, like Pompe disease, that weaken the muscles controlling movement, breathing, and coughing.

Pulmonologist – A doctor who specializes in lung diseases and respiratory care, often managing cough-assist and BiPAP therapy.

COUGH ASSIST
(*Mechanical Insufflator-Exsufflator*)



Respiratory muscles – The muscles involved in breathing, including the diaphragm, chest, and abdominal muscles.

Suctioning – The removal of mucus or secretions from the airway using a small tube connected to a suction machine.

Ventilation / Ventilatory support – The movement of air in and out of the lungs. Machines like BiPAP or ventilators provide assistance when breathing muscles are weak.

Vest therapy – Also called “high-frequency chest wall oscillation.” A vibrating vest that loosens mucus to help clear the lungs before or along with cough-assist use.