

## Patient information factsheet

### Autogenic drainage

This factsheet explains what autogenic drainage (AD) is and how to perform the airway clearance technique.

Patient name: \_\_\_\_\_ Hospital number: \_\_\_\_\_

#### What is autogenic drainage (AD)?

AD is a respiratory self-drainage breathing technique that uses controlled breathing at different lung volumes to move secretions (phlegm) from targeted airways. By breathing at different levels, secretions can be moved from different parts of the airways.

Secretions lower down in the airways are moved by breathing at low lung volumes (with only a small amount of air in the lungs). By breathing at higher lung volumes (with a larger sized breath), secretions which are higher up in the airways can be moved and cleared.

#### How should I prepare for AD?

- Clear your throat and blow your nose
- Use bronchodilators, such as Ventolin (salbutamol inhaler), as required
- Use sinus rinses as required

#### What positions are best for AD?

- Sitting upright
- Lying on your left side
- Lying on your right side
- Lying on your side at a quarter turn

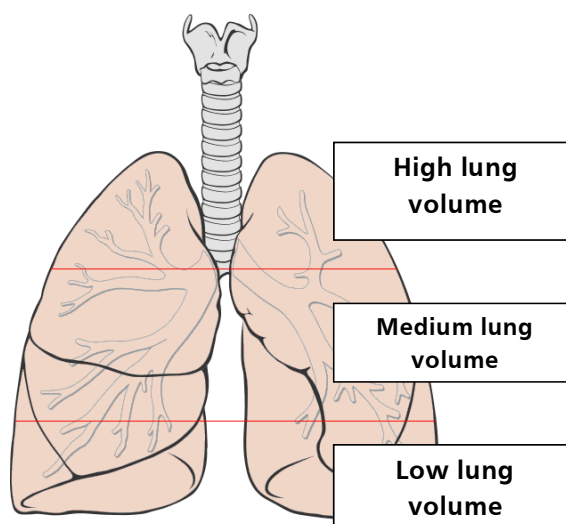
#### How do I perform the AD technique?

##### When you breathe in:

- it should be gently through your nose to the necessary volume
- hold your breath for the count of three
- try not to cough

##### When you breathe out:

- it should be through your mouth, like a forceful sigh (this should not be as forced as a huff or a spirometry blow)
- try to keep your mouth in an 'o' shape
- try not to cough
- you should hear some crackles on your breath out (sometimes mistaken for wheeze)



## The AD cycle

1. First, take a deep breath all the way in and out to see where the crackles are. This is known as an assessment breath. If the crackles are at the beginning of your breath out, you should start with high volume breaths. If the crackles are near the end of your breath out, you should start with low volume breaths.
2. Start at whichever size breath is needed. Repeat the same sized breath until the crackles get louder. Then increase the size of your breath and repeat this process again.
3. When the crackles are loud at high lung volume, you should huff and cough as needed.
4. When you huff, imagine you are steaming up a window or mirror in front of you. Keep your mouth open and forcefully breathe out using your tummy muscles.

Repeat

Regime

Physiotherapist's name

Signature

If you are a patient at one of our hospitals and need this document translated, or in another format such as easy read, large print, Braille or audio, please telephone **0800 484 0135** or email **patientsupporthub@uhs.nhs.uk**

For help preparing for your visit, arranging an interpreter or accessing the hospital, please visit **www.uhs.nhs.uk/additionalsupport**

Join our family of charity supporters with a monthly donation! It's a wonderful way to show your ongoing support of our patients and staff.

Scan the QR code or visit [southamptonhospitalscharity.org/donate](https://southamptonhospitalscharity.org/donate)



**Southampton  
Hospitals  
Charity**

Charity Registration Number 1051543

