

SUPPLEMENTARY MATERIAL

Figure S1. Correlations between RV/TLC and impulse oscillometry parameters (% of predicted) including (A) difference between resistance in 5Hz and 20Hz (R_5-R_{20}), (B) reactance in 5 Hz (X_5), (C) resonant frequency (F_{res}) and (D) area under reactance curve between 5 Hz and resonant frequency (AX). RV, residual volume; TLC, total lung capacity.

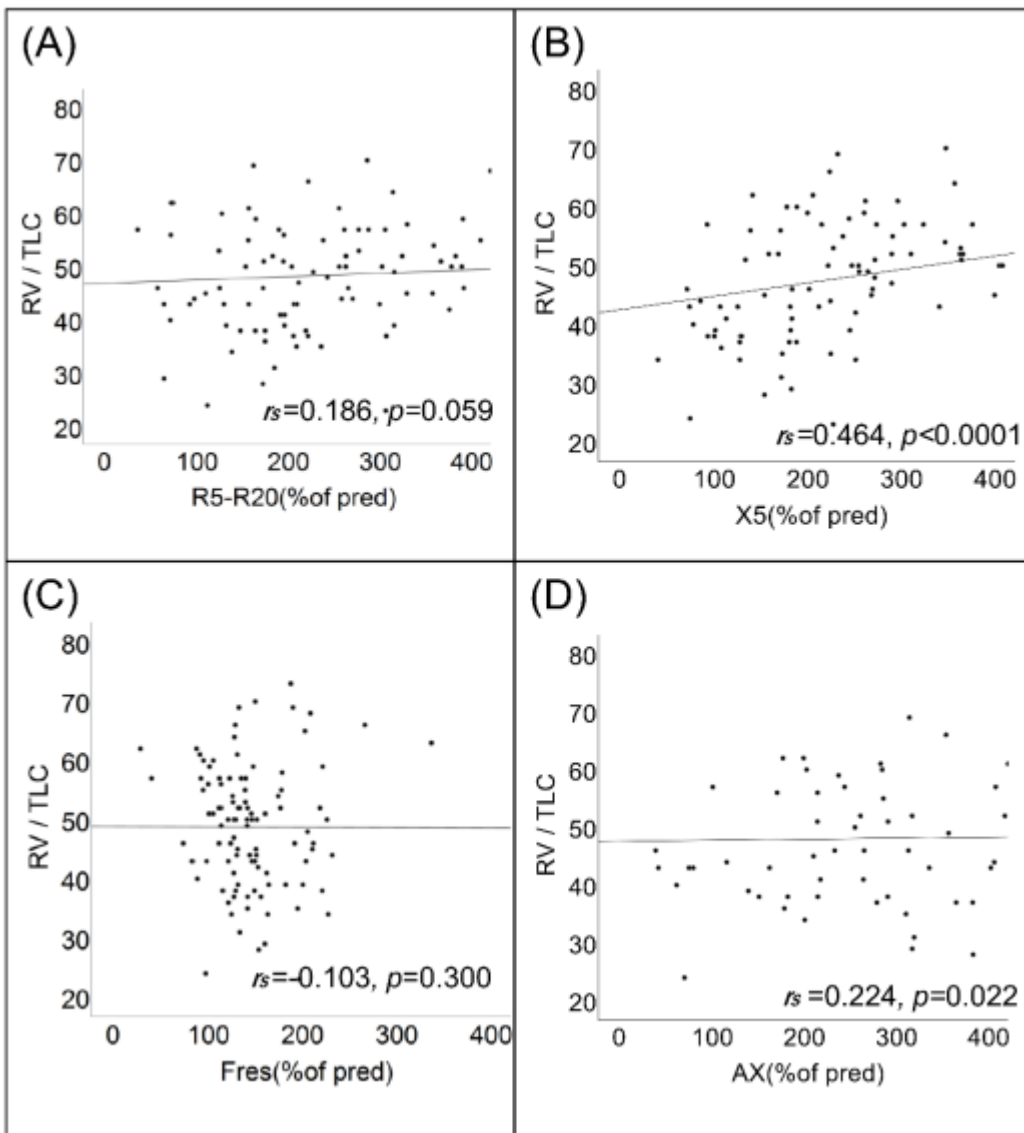


Figure S2. Receiver operating characteristic curve analysis of impulse oscillometry parameters (% of predicted) to detect static lung hyperinflation (SLH) in patients with severe asthma. R_5 , resistance in 5 Hz; R_{20} , resistance in 20 Hz; X_5 , reactance in 5 Hz; F_{res} , resonant frequency; AX, area under reactance curve between 5 Hz and resonant frequency.

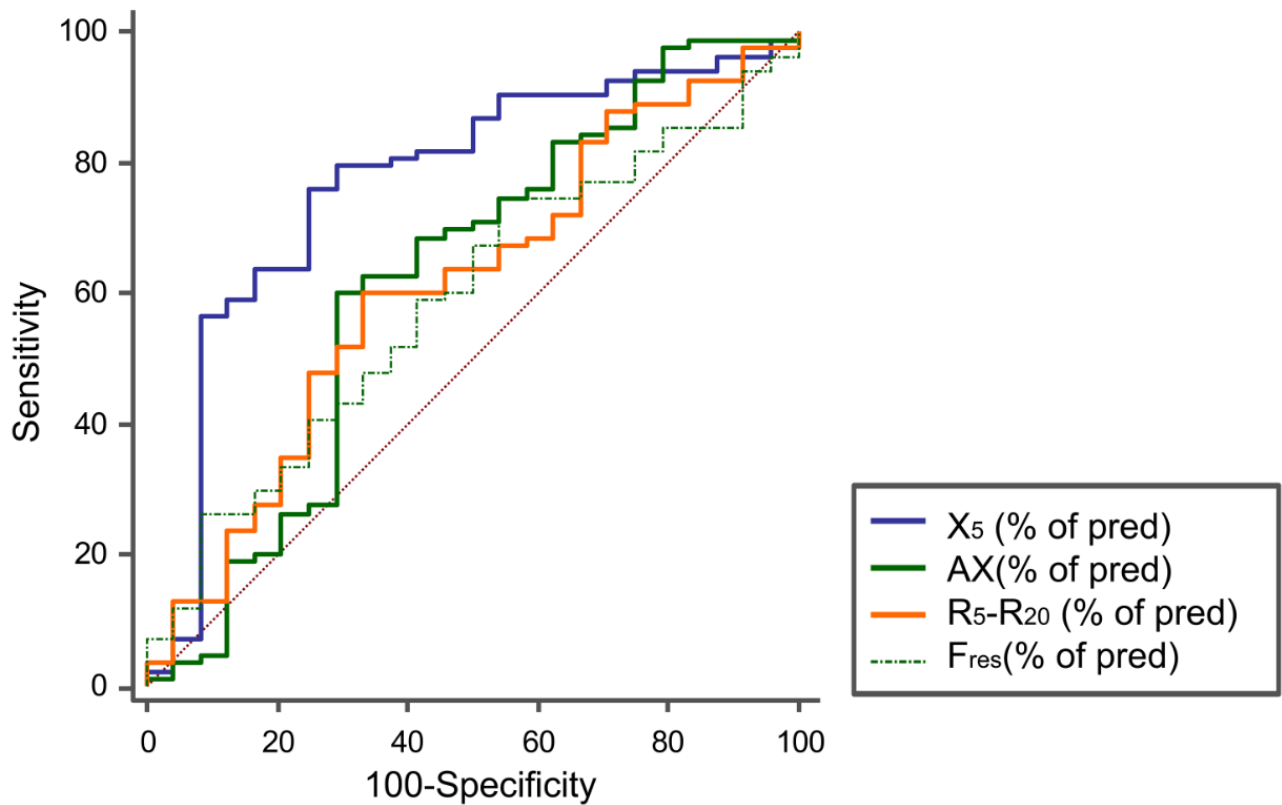


Figure S3. Correlations between RV/TLC and impulse oscillometry parameters, including (A) absolute value of resistance in 5Hz (R_5), (B) absolute value of resistance in 20 Hz (R_{20}), (C) R_5 (% of predicted) and (D) R_{20} (% of predicted). RV, residual volume; TLC, total lung capacity.

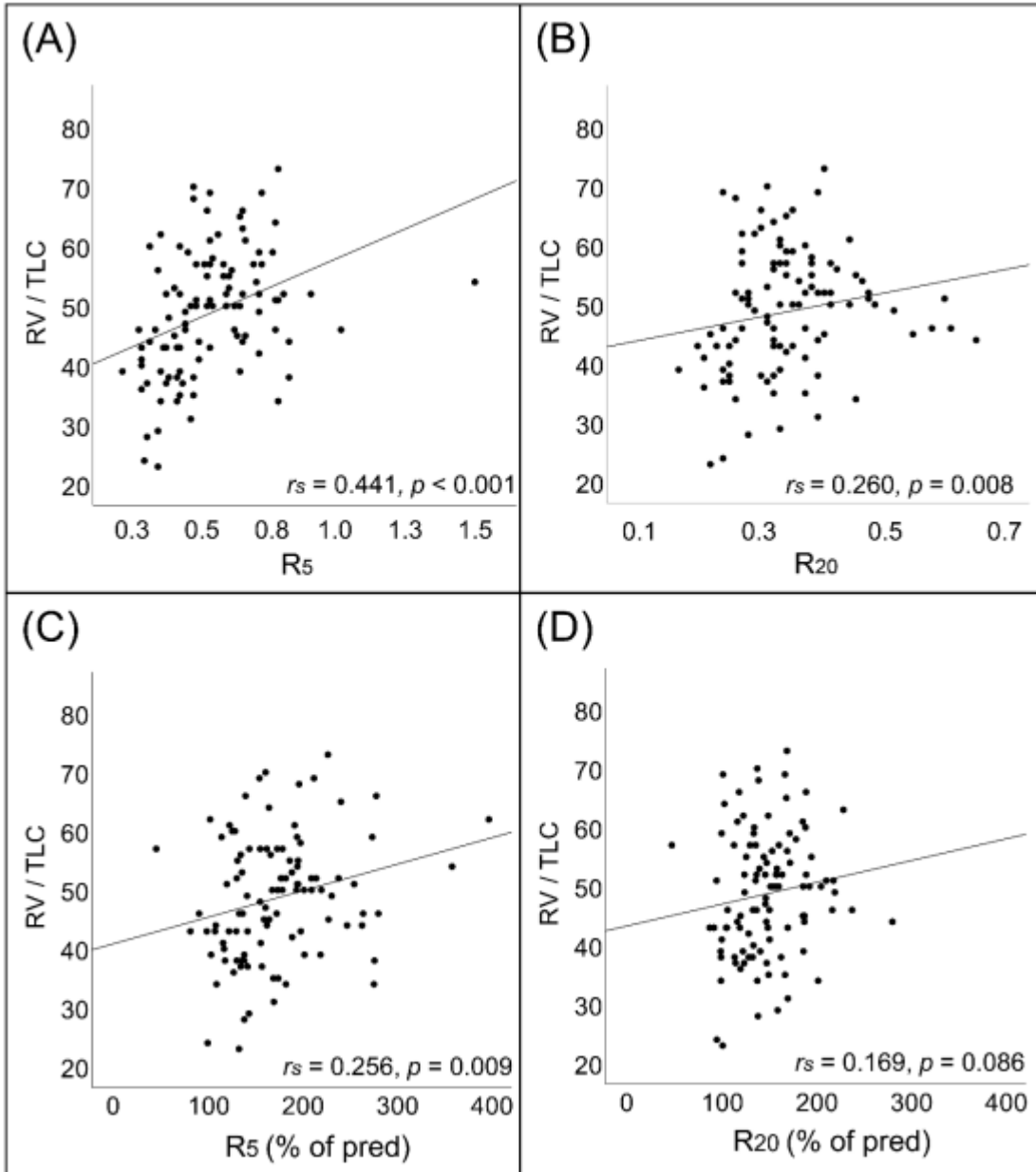


Figure S4. Receiver operating characteristic curve analysis of impulse oscillometry parameters, including (A) absolute value of resistance in 5Hz (R_5), (B) absolute value of resistance in 20 Hz (R_{20}), (C) R_5 (% of predicted) and (D) R_{20} (% of predicted) to detect static lung hyperinflation (SLH) in patients with severe asthma. AUC: area under the receiver operating characteristic curve.

