

# PillowsPlus nasal cannula for sleep

<b>Submission date</b> 24/09/2025	<b>Recruitment status</b> No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
<b>Registration date</b> 10/10/2025	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
<b>Last Edited</b> 02/10/2025	<b>Condition category</b> Respiratory	<input type="checkbox"/> Individual participant data <input checked="" type="checkbox"/> Record updated in last year

## Plain English summary of protocol

### Background and study aims

This study is testing a new nasal oxygen interface, called the PillowsPlus Nasal Cannula (PPNC). The goal is to see if it improves oxygen delivery during sleep for patients who use long-term oxygen therapy. Standard nasal cannulas can fail to deliver enough oxygen when people breathe through their mouths or during sleep. The new device is designed to fix this problem by making portable oxygen concentrators more reliable.

### Who can participate?

Adults (18 years and older) prescribed up to 6 liters per minute of oxygen can join. People with moderate or severe sleep apnea, those who need nighttime CPAP/BiPAP, or those fully dependent on mechanical ventilation cannot take part. Patients with significant facial injuries that prevent use of nasal cannulas are also excluded.

### What does the study involve?

Participation lasts about 4 days. Each participant completes three overnight sleep studies at home wearing a pulse oximeter and using different combinations of oxygen equipment:

Night 1: Standard cannula with a stationary oxygen concentrator.

Nights 2 and 3: Either the new PPNC or a standard cannula with a portable concentrator (order randomized).

Oxygen levels and heart rate are recorded, and participants fill out comfort questionnaires.

### What are the possible benefits and risks of participating?

Potential benefits include helping to improve portable oxygen therapy devices for future patients. Risks are minimal but may include discomfort from the cannula or lower oxygen levels. A physician will review safety data, and unsafe results will lead to stopping further testing for that participant.

### Where is the study run from?

Northern Alberta Institute of Technology (NAIT) (Canada)

### When is the study starting and how long is it expected to run for?

August 2024 to August 2025

Who is funding the study?  
PulmVita Inc. with support from Alberta Innovates (AICE–Validate Grant and Health Innovation Platform Partnership Grant) (Canada)

Who is the main contact?  
Dr Daniel Vis, [daniel.vis@ucalgary.ca](mailto:daniel.vis@ucalgary.ca)

## Contact information

### Type(s)

Public, Scientific, Principal investigator

### Contact name

Dr Daniel Vis

### ORCID ID

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### Contact details

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## Additional identifiers

### Clinical Trials Information System (CTIS)

Nil known

### Protocol serial number

Health Canada Investigational Testing Authorization #381594

## Study information

### Scientific Title

Determining the effects of a PillowsPlus Nasal Cannula on oxygenation during ambulation and sleep

### Study objectives

The study aims to determine the effects of the PillowsPlus Nasal Cannula (PPNC) on oxygenation during sleep.

### Ethics approval required

Ethics approval required

### Ethics approval(s)

1. approved 26/08/2024, University of Alberta Research Ethics Office (11312 – 89 Avenue NW, Edmonton, T6G 2N2, Canada; +1 (0)780 492 9724; reoffice@ualberta.ca), ref: UofA REB ID: Pro00148005

2. approved 26/08/2024, Northern Alberta Institute of Technology Research Ethics Board (11762 - 106 Street, Edmonton, T5G 2R1, Canada; +1 (0)780 471 6248; reb@nait.ca), ref: NAIT REB ID: 2024-08

## **Study design**

Multicenter interventional single-blinded randomized cross over trial

## **Primary study design**

Interventional

## **Study type(s)**

Safety

## **Health condition(s) or problem(s) studied**

Nocturnal oxygenation in patients on long-term oxygen therapy

## **Interventions**

We performed a three-night, two-sequence cross over study, adults on long-term oxygen therapy slept one night with a standard nasal cannula on a stationary continuous-flow concentrator (baseline), one night with PillowsPlus nasal cannula (PPNC) on continuous flow, and one night with PPNC on a pulsed-flow concentrator. The method of randomization was randomization software set to produce an even distribution across conditions.

## **Intervention Type**

Device

## **Phase**

Not Applicable

## **Drug/device/biological/vaccine name(s)**

PillowsPlus nasal cannula

## **Primary outcome(s)**

Nocturnal average SpO<sub>2</sub> by pulse oximetry, measured at baseline with a standard cannula + stationary concentrator compared to a PillowsPlus nasal cannula + a portable concentrator and a PillowsPlus nasal cannula + stationary concentrator on sequential nights. Designed and powered for non-inferiority.

## **Key secondary outcome(s)**

1. Nocturnal average heart rate by pulse oximetry, measured at baseline with a standard cannula +stationary concentrator compared to a PillowsPlus nasal cannula +stationary concentrator and a PillowsPlus nasal cannula + stationary concentrator on sequential nights.
2. Frequency of oxygen desaturation events of 3% or greater by pulse oximetry, measured by blinded, manual scoring of oximetry data by a respirologist. Baseline recorded with standard cannula +stationary concentrator, compared to a PillowsPlus nasal cannula +stationary concentrator and a PillowsPlus nasal cannula + stationary concentrator on sequential nights.
3. Patient comfort data as measured with patient surveys at baseline with standard cannula

+stationary concentrator, compared to a PillowsPlus nasal cannula +stationary concentrator and a PillowsPlus nasal cannula + stationary concentrator on sequential nights.

**Completion date**

22/08/2025

## Eligibility

**Key inclusion criteria**

Patients aged over 18 years on chronic domiciliary oxygen therapy

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Adult

**Lower age limit**

18 years

**Sex**

All

**Total final enrolment**

27

**Key exclusion criteria**

1. Requiring >6 L of O<sub>2</sub> per minute at baseline
2. Previously established need for any nocturnal positive airway pressure therapy for conditions such as CPAP for obstructive sleep apnea (OSA), ASV for central sleep apnea, or BiPAP for obesity hypoventilation syndrome
3. Patients fully dependent on mechanical ventilation and/or those with facial injuries that preclude the use of a standard cannula or the PPNC will be excluded
4. Patients with an Apnea-Hypopnea Index (AHI) >15 will be excluded from further testing

**Date of first enrolment**

05/06/2025

**Date of final enrolment**

22/08/2025

## Locations

**Countries of recruitment**

Canada

**Study participating centre**  
**Northern Alberta Institute of Technology**  
11762 - 106 Street  
Edmonton  
Canada  
T5G 2R1

**Study participating centre**  
**University of Alberta**  
11312 – 89 Avenue NW  
Edmonton  
Canada  
T6G 2N2

## **Sponsor information**

**Organisation**  
Alberta Innovates

**ROR**  
<https://ror.org/00ynafe15>

## **Funder(s)**

**Funder type**  
Industry

**Funder Name**  
Pulmvita Inc.

**Funder Name**  
Alberta Innovates

## **Results and Publications**

**Individual participant data (IPD) sharing plan**

The datasets generated during and/or analyzed during the current study will be available upon request from Efrem Violato (efrem@nait.ca) or Daniel Vis (daniel.vis@ucalgary.ca).

The study will collect oxygen saturation and heart rate data from pulse oximetry, comfort questionnaire responses, and basic demographics. All data are coded by study ID, with identifiers stored separately and securely by the principal investigator.

Data will be stored securely for at least 5 years and then destroyed. Only de-identified, coded datasets are shared between the investigators at NAIT and Pulmvita Inc. Analyses will compare oxygen delivery and patient comfort, with results published in aggregate only.

Data sharing is limited to anonymised files exchanged between research partners; there is no open-access repository. Written informed consent is obtained, and participants may withdraw their data before publication.

Ethical restrictions prevent identifiable data from leaving the study team. Any withdrawals, adverse events, or protocol deviations will be reported in the final outputs.

### IPD sharing plan summary

Available on request

#### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Other files</a>	Comfort Questionnaire		02/10/2025	No	No
<a href="#">Other files</a>	Consent Form		02/10/2025	No	No