

Once-daily triple-Tx improves lung function, HRQoL in COPD

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(HealthDay)—For patients with chronic obstructive pulmonary disease



(COPD), once-daily single-inhaler triple therapy is better for lung function and health-related quality of life than inhaled corticosteroid (ICS)/long-acting β_2 -agonist (LABA) therapy, according to a study published in the Aug. 15 issue of the *American Journal of Respiratory and Critical Care Medicine*.

David A. Lipson, M.D., from GlaxoSmithKline in King of Prussia, Pa., and colleagues compared the effects of once-daily triple <u>therapy</u> on <u>lung</u> <u>function</u> and health-related quality of life with twice-daily ICS/LABA therapy for 24 weeks as part of a randomized trial. A total of 1,810 participants were randomized to triple therapy (911 patients; fluticasone furoate/umeclidinium/vilanterol) and ICS/LABA therapy (899 patients; budesonide/formoterol). A subgroup of patients remained on blinded treatment for up to 52 weeks.

The researchers found that the mean changes from baseline in forced expiratory volume in one second were 142 mL and -29 mL, for the triple therapy and ICS/LABA therapy groups, respectively; mean changes from baseline in St. George's Respiratory Questionnaire scores were -6.6 and -4.3 units, respectively. The between-group differences for both end points were statistically significant. For triple therapy versus dual ICS/LABA therapy there was a statistically significant reduction in moderate/severe exacerbation rates (35 percent reduction).

"These results support the benefits of single-inhaler triple therapy compared with ICS/LABA therapy in patients with advanced COPD," the authors write.

Several authors disclosed financial ties to GlaxoSmithKline, which funded the study.

More information: <u>Abstract</u>

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