

# Long-acting inhaler may help in early stage COPD, too

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(HealthDay)—The inhaler medication Spiriva (tiotropium bromide) may

help slow the progression of COPD if given in the early stages of the disease, a new study suggests.

Researchers found that the drug helped patients preserve more lung function over two years. It also cut down on [symptom](#) flare-ups and boosted patients' quality of life, on average.

All of the study patients were in the early stages of chronic obstructive pulmonary disease, or COPD—a group of serious lung conditions that include emphysema and chronic bronchitis.

Experts said the study, funded by Spiriva maker Boehringer Ingelheim, could help change the way early COPD is managed.

Until now, nothing has been shown to slow the progression of early COPD—other than smoking cessation, said Dr. Louis DePalo, a lung disease specialist who wasn't involved in the study.

"Quitting smoking is the one thing that's tried and true," said DePalo, a professor of pulmonology at Mount Sinai's Icahn School of Medicine in New York City.

But as far as medication, there has been a "nihilistic" attitude among doctors, DePalo said. Often, they see no point in prescribing a drug like Spiriva, he explained, unless patients have chronic symptoms that need relief.

That might start changing now, according to DePalo.

COPD affects more than 11 million people in the United States alone, according to the American Lung Association. And it's the third-leading cause of death nationwide.

There is no cure for COPD, but there are therapies to control the symptoms and improve patients' quality of life. The medications include inhaled bronchodilators, which relax the muscles around the airways and make it easier to breathe.

There are short-acting bronchodilators, which are used "as needed" to control symptom flare-ups. And there are long-acting ones, like Spiriva, which are used daily to control symptoms.

People in the early stages of COPD may have minimal symptoms. So their doctors may prescribe only short-acting medications, along with smoking cessation, said Dr. MeiLan Han, a spokesperson for the American Lung Association.

Han, who wasn't involved in the research, also used the word "nihilism" to describe the traditional view of treating early stage COPD.

She pointed to the current guidelines from the U.S. Preventive Services Task Force. They recommend against screening for COPD in people who are symptom-free, partly because there was no good evidence that early treatment slowed the disease down.

"These new data could start to turn everything on its head," Han said.

More research is still needed to back up the current findings, according to Han. If that happens, "this could be a real game-changer," she said.

"We may need to get more aggressive about screening and diagnosing this earlier," Han said.

The study included 841 patients in China. All were diagnosed with stage 1 or 2 COPD, and most had minimal to no symptoms at the outset.

Researchers—led by Dr. Pixin Ran from Guangzhou Medical University—randomly assigned the patients to use either Spiriva or an inhaler containing a placebo, once a day for two years.

In the end, patients on Spiriva showed better [lung function](#) on standard tests. They were also less likely to have had a symptom attack during the study period—29 percent on the medicine versus 39 percent on placebo.

And compared with the placebo group, people on medication gave higher ratings to their quality of life.

"It translated to improvements in how patients felt, which is what we really care about," DePalo said.

But it's difficult to know, he said, how the findings will affect everyday patient care. It can be hard, for instance, to get patients to use an inhaler if they are "feeling fine," DePalo said.

"And these inhalers can be expensive," he noted.

Plus, most patients with early stage COPD are seeing primary care doctors, not lung specialists.

"The primary care providers are treating a lot of different diseases," DePalo noted. "And they're more focused on diabetes, high blood pressure, high cholesterol."

In fact, Han said, the majority of Americans diagnosed with COPD have never had spirometry. That's a simple breathing test that helps confirm a COPD diagnosis and gauge how severe it is.

She said patients diagnosed with COPD should make sure they've had spirometry. "Your COPD may be more advanced than you think, or you

may not even have it," Han said.

As for treatment, DePalo said, [patients](#) with milder COPD can ask their doctor whether a long-acting bronchodilator could be appropriate.

"These data should start prompting more discussions," he said.

Findings were published Sept. 6 in the *New England Journal of Medicine*.

**More information:** Louis DePalo, M.D., professor, pulmonary, critical care and sleep medicine, Icahn School of Medicine at Mount Sinai, New York City; MeiLan Han, M.D., associate professor, internal medicine, University of Michigan Health System, Ann Arbor, and spokesperson, American Lung Association, Chicago; Sept. 7, 2017, *New England Journal of Medicine*

The American Lung Association has more on [COPD](#).

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