

Trimbow®

beclometasone/formoterol/ glycopyrronium 87/5/9 & 88/5/9 Extrafine formulation

Have you triple checked your patients with COPD?

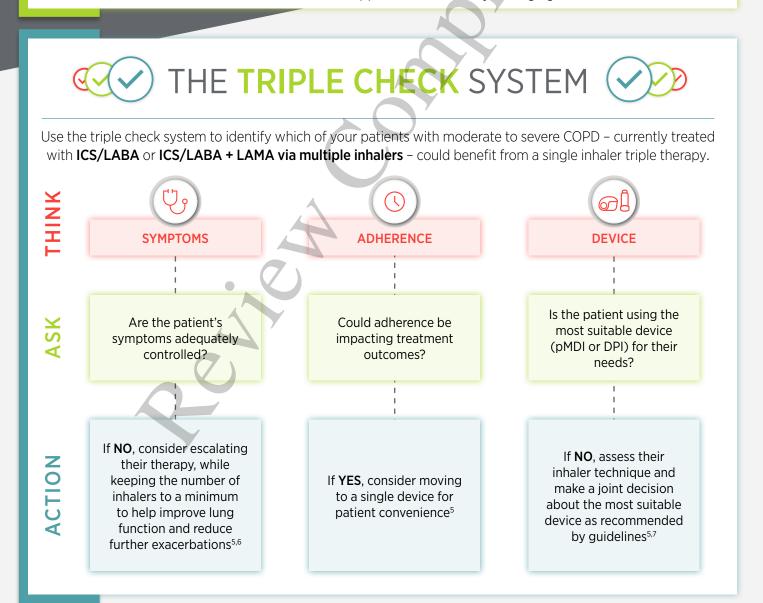
Trimbow pMDI 87/5/9 and NEXThaler 88/5/9 are indicated for maintenance treatment in adult patients with moderate to severe chronic obstructive pulmonary disease (COPD) who are not adequately treated by a combination of an inhaled corticosteroid and a long-acting β_2 -agonist or a combination of a long-acting β_2 -agonist and a long-acting muscarinic antagonist (for effects on symptoms control and prevention of exacerbations see section 5.1 of the SPC).^{1,2} Fostair pMDI and NEXThaler 100/6 are indicated for the symptomatic treatment of adult patients with severe COPD (FEV₁ <50% predicted normal) and a history of repeated exacerbations, who have significant symptoms despite regular therapy with long-acting bronchodilators.^{3,4}

Prescribing Information and Adverse Event reporting can be found at the end of this document.

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Optimise care for your adult patients with moderate to severe COPD

According to GOLD recommendations, it is important to regularly monitor patients as this allows for a more tailored approach in effectively managing COPD.⁵



Choose Trimbow, in either a pMDI or NEXThaler® (DPI), for your appropriate adult patients with moderate to severe COPD





Trimbow

beclometasone/formoterol/ alvcopyrronium 87/5/9 & 88/5/9 Extrafine formulation

Think triple (ICS/LABA/LAMA), **Think Trimbow**

Extrafine formulation like Fostair® (beclometasone/formoterol)1-4

Choice of device to help meet your patients' needs^{1,2}

The Click of Confidence with NEXThaler for you and your patients who need a DPI^{2,8}

 Confidence for your patients through confirmed dose deliverv^{2,8}

A familiar pMDI device for your patients who need it 1,9,10

Trimbow pMDI 87/5/9 demonstrated:

- Similar rates of moderate to severe exacerbations. vs. multiple inhalers (Fostair pMDI 100/6 + Spiriva® HandiHaler® [RR 1.01]) – secondary endpoint^{1,11}
- Reduction in moderate to severe exacerbations vs. ICS/LABA (Fostair pMDI 100/6) – secondary endpoint 1,12*





COPD: chronic obstructive pulmonary disease; DPI: dry powder inhaler; FEV1: forced expiratory volume in one second; GOLD: Global Initiative for Chronic Obstructive Lung Disease; ICS: inhaled corticosteroid; LABA: long-acting β_2 -agonist; LAMA: long-acting muscarinic antagonist; N: number of patients; pMDI: pressurised metered dose inhaler; RR: (adjusted) rate ratio; SPC: summary of product characteristics: TDI: Transition Dyspnea Index

*Co-primary endpoints of TRILOGY: Superiority of Trimbow pMDI 87/5/9 vs. Fostair pMDI 100/6 was met in change from baseline in pre-dose morning FEV₁ (p<0.001), change from baseline in 2-h post-dose FEV₁ (p<0.001), but unmet for TDI focal score (p=0.160), all assessed at week 26 (N=1,368).12 As one of the co-primary endpoints in the TRILOGY study did not achieve statistical significance, p-values shown for the TRILOGY study are descriptive.

Adverse events should be reported. Reporting forms and information can be found at https://yellowcard.mhra.gov.uk or search for MHRA Yellow Card in the Google Play or Apple App Store. Adverse events should also be reported to Chiesi Limited on 0800 0092329 (UK) or PV.UK@Chiesi.com.

Certified



References

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- Trimbow NEXThaler 88/5/9. Summary of Product Characteristics. Chiesi Limited.
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- 12. Singh D, et al. Lancet. 2016; 388(10048): 963-973.



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