For Healthcare Professionals Only

Trimbow® (beclometasone/formoterol/glycopyrronium) Chronic Obstructive Pulmonary Disease (COPD) Search Tool Rationale

This document explains the search rationale used to identify adult patients with moderate-to-severe COPD potentially eligible for Trimbow®.

This promotional search tool has been fully funded by Chiesi Ltd and developed by Oberoi Consulting Ltd.

Chiesi is providing this search tool to support clinicians in identifying adult patients potentially eligible for Trimbow® (beclometasone/formoterol/glycopyrronium) [BDP/FF/G]. The search tool does not replace clinical judgement. It is the role of the healthcare organisation to assess the list of patients generated by the searches, to clinically review the patients identified and optimise their medication accordingly. Patient cohorts have been broken down by exacerbations (using antibiotic and oral corticosteroid issues as a surrogate marker for moderate exacerbations) and MRC to indicate severity. Please note Trimbow® is indicated for moderate-severe COPD (please see full licensed indication), clinical judgement will need to be used to assess the severity of COPD, ideally using spirometry.

Trimbow® Licensing Information

Trimbow® pMDI 87/5/9 and Trimbow® NEXThaler 88/5/9 are licensed for the maintenance treatment of moderate to severe COPD in adults who are not adequately treated by a combination of an inhaled corticosteroid and a long-acting β2-agonist or a combination of a long-acting β2-agonist and a long-acting muscarinic antagonist.

Trimbow® Prescribing Information can be found via this link https://www.chiesiair.co.uk/hcp/prescribing-information-2/#trimbow
Fostair® (beclometasone/formoterol) Prescribing Information can be found via this link https://www.chiesiair.co.uk/hcp/prescribing-information-2/#fostair

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.

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COPD Severity Identification Coding Limitations

Due to a lack of coding across GP practices relating to COPD severity and FEV_1 values, severity cannot be determined solely through diagnostic coding.

Therefore, patient cohorts 1 and 2 have been segmented by hospitalisations, moderate exacerbations (using antibiotic and oral corticosteroid issues as a surrogate marker for moderate exacerbations) and MRC to indicate symptom burden.

This approach enables identification of patients more likely to have moderate-to-severe disease, despite incomplete severity coding. Healthcare professionals must assess individual patients' records to understand whether COPD severity has been captured.

The parameters used in the search tool provide an informed estimate of disease severity; however, they do not replace formal classification through spirometry. Clinical judgement remains essential when reviewing patients to determine true COPD severity and appropriateness of therapy optimisation.

Trimbow® is indicated for patients who have moderate-to-severe COPD (please see full licensed indication on page 1 of this document).

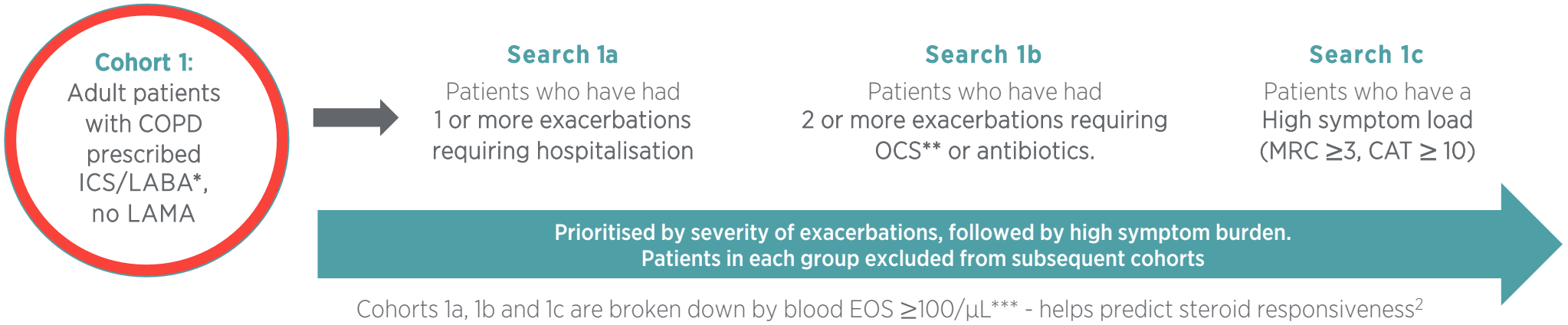
Patient Cohorts

Cohort 1 - Adult patients with COPD prescribed ICS/LABA*, no LAMA

Identification focus:
Patients prescribed either ICS/LABA combination inhalers or separate ICS and LABA inhalers who continue to experience symptoms and/or exacerbations.

Clinical opportunity:
Assessment for potential step-up to Trimbow® where appropriate.

Rationale:
Help optimise symptom control, reduce exacerbation risk, align with evidence-based escalation pathways and simplify treatment where possible.[1]



Cohorts 1a, 1b and 1c are broken down by blood EOS ≥100/µL*** - helps predict steroid responsiveness[2]

ICS: Inhaled corticosteroids; **LABA**: Long-acting β2-agonist; **LAMA**: Long-acting muscarinic antagonist; **OCS**: Oral corticosteroids; **MRC**: Medical Research Council Dyspnea Scale; **CAT**: COPD Assessment Test. **EOS:** Eosinophil
Prescription issued in last 4 months. ** Prescription issued in last 12 months.
*** Eosinophil level of ≥100/µL is the same as ≥0.1x109/L in the clinical systems

1. Singh et al., 2019, Respir Res, 20:204. Available at: https://www.dovepress.com/extrafine-triple-therapy-delays-copd-clinically-important-deterioratio-peer-reviewed-fulltext-article-COPD. [Last accessed April 2026].
2. Global Strategy for Prevention, Diagnosis and Management of COPD: 2026 Report 2026 Report. Available at: https://goldcopd.org/2026-gold-report/ [Last Accessed: April 2026].

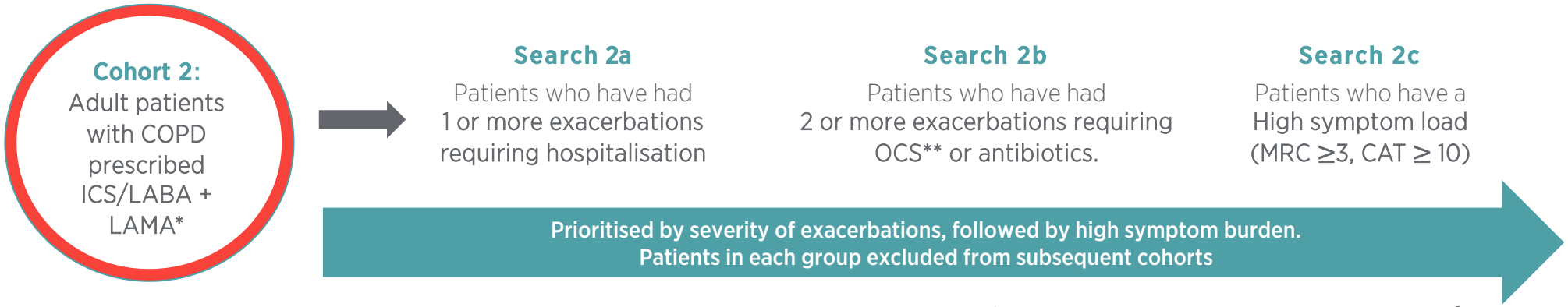
Patient Cohorts

Cohort 2 - Adult patients with COPD prescribed ICS/LABA + LAMA*

Identification focus:
Patients currently prescribed triple therapy components (ICS/LABA/LAMA) delivered through two or more separate inhalers.

Clinical opportunity:
Review suitability for transition to Trimbow® where clinically appropriate.

Rationale:
Reduce inhaler burden, help improve adherence, simplify prescribing and help enhance inhaler technique consistency.[1]



Cohorts 2a, 2b and 2c are broken down by blood EOS ≥100/µL*** - helps predict steroid responsiveness[2]

ICS: Inhaled corticosteroids; **LABA**: Long-acting β2-agonist; **LAMA**: Long-acting muscarinic antagonist; **OCS**: Oral corticosteroids; **MRC**: Medical Research Council Dyspnea Scale; **CAT**: COPD Assessment Test. **EOS:** Eosinophil
***Prescription issued in last 4 months. ** Prescription issued in last 12 months.**
*** Eosinophil level of ≥100/µL is the same as ≥0.1x109/L in the clinical systems

1. Vestbo et al., 2017, Lancet, 389:1919–1929. Available at: https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(17)30188-5/abstract [Last accessed April 2026].
2. Global Strategy for Prevention, Diagnosis and Management of COPD : 2026 Report 2026 Report. Available at: https://goldcopd.org/2026-gold-report/ [Last Accessed: April 2026].

Exclusion Criteria

Patients excluded from all cohorts:

- Patients on palliative care register (red or amber)
- Patients with asthma
- Patients with both asthma and COPD coded
- Patients with just emphysema with no COPD code
- Patients already receiving triple therapy with any combined ICS/LABA/LAMA inhaler

ICS: Inhaled corticosteroids; LABA: Long-acting β2-agonist; LAMA: Long-acting muscarinic antagonist;

ICS Only Inhalers Included in the Searches

A comprehensive list of all currently marketed inhalers that are included in the searches are listed below, this list has been verified using NICE/BTS/SIGN and Rightbreathe.[1,2]

ICS-only inhalers are not licensed for use in COPD; however, they have been included to allow for review and optimisation of current treatment for patients with COPD.

Inhalers are selected by both brand and generic name.

Beclometasone

Easyhaler Beclometasone 200mcg (DPI)
Clenil Modulite (Beclometasone)200mcg (pMDI)
Soprobec 200mcg (pMDI)
Clenil Modulite (Beclometasone) 250mcg (pMDI)
Kelhale 100mcg (pMDI)
Soprobec 250mcg (pMDI)
Qvar 100mcg Autohaler (pMDI)
Qvar 100mcg Easi-Breathe (pMDI)
Qvar 100mcg (pMDI)

Budesonide

Easyhaler Budesonide 200mcg (DPI)
Pulmicort 200mcg Turbohaler (DPI)
Budelin Novolizer 200mcg (DPI) + refill
Budesonide Easyhaler 400mcg (DPI)
Pulmicort 400mcg Turbohaler (DPI)
Pulmicort 0.5mg and 1mg Respules

Ciclesonide

Alvesco 80mcg (pMDI)
Alvesco 160mcg (pMDI, 60 doses, 120 doses)

Fluticasone

Flixotide 125mcg Evohaler (pMDI)
Flixotide 250mcg Accuhaler (DPI)
Flixotide 250mcg Evohaler (pMDI)
Flixotide 500mcg Accuhaler (DPI)

Mometasone

Asmanex 200mcg Twisthaler (DPI)
Asmanex 400mcg Twisthaler (DPI)

ICS: inhaled corticosteroid; **NICE:** National Institute for Health and Care Excellence; **BTS:** British Thoracic Society; **SIGN**: Scottish Intercollegiate Guidelines; **DPI:** dry powder inhaler; mcg: micrograms; **pMDI:** pressurised, metered-dose inhaler.

1. National Institute for Health and Care Excellence, British Thoracic Society & Scottish Intercollegiate Guidelines Network, 2025. *Inhaled corticosteroid doses for the BTS, NICE and SIGN asthma guideline*, 12 November 2025. Available at: https://www.nice.org.uk/guidance/ng245/resources/inhaled-corticosteroid-doses-for-the-bts-nice-and-sign-asthma-guideline-pdf-13558148029 [Last Accessed: April 2026].
2. RightBreathe. Available at: https://www.rightbreathe.com [Last Accessed: Aprill 2026].

LABA Only Inhalers Included in the Searches

A comprehensive list of all currently marketed inhalers that are included in the searches are listed below, this list has been verified using NICE/BTS/SIGN and Rightbreathe.[1,2]

Inhalers are selected by both brand and generic name.

Formoterol

Atimos Modulite 12mcg (pMDI)
Foradil 12mcg (DPI)
Formoterol Easyhaler 12mcg (DPI)
Oxis 6mcg Turbohaler (DPI)
Oxis 12mcg Turbohaler (DPI)

Indacaterol

Onbrez 150mcg Breezhaler (DPI)
Onbrez 300mcg Breezhaler (DPI)

Olodaterol

Striverdi Respimat 2.5mcg (+ refills, soft mist inhaler)

Salmeterol

Serevent 25mcg Evohaler (pMDI)
Serevent 50mcg Accuhaler (DPI)
Soltel 25mcg (pMDI)

LABA: Long-acting β2-agonist; NICE: National Institute for Health and Care Excellence; **BTS:** British Thoracic Society; **SIGN**: Scottish Intercollegiate Guidelines; **DPI:** dry powder inhaler; mcg: micrograms; **pMDI:** pressurised, metered-dose inhaler.

1. National Institute for Health and Care Excellence, British Thoracic Society & Scottish Intercollegiate Guidelines Network, 2025. *Inhaled corticosteroid doses for the BTS, NICE and SIGN asthma guideline*, 12 November 2025. Available at: https://www.nice.org.uk/guidance/ng245/resources/inhaled-corticosteroid-doses-for-the-bts-nice-and-sign-asthma-guideline-pdf-13558148029 [Last Accessed: April 2026].
2. RightBreathe. Available at: https://www.rightbreathe.com [Last Accessed: Aprill 2026].

LAMA Only Inhalers Included in the Searches

A comprehensive list of all currently marketed inhalers that are included in the searches are listed below, this list has been verified using NICE/BTS/SIGN and Rightbreathe.[1,2]

Inhalers are selected by both brand and generic name.

Aclidinium

Eklira 322mcg Genuair (DPI)

Glycopyrronium

Seebri Breezhaler 44mcg (DPI)

Tiotropium

Acopair 18mcg NeumoHaler (DPI)
Braltus 10mcg with Zonda Inhaler (DPI)
Spiriva 18mcg with HandiHaler (DPI)
Spiriva 2.5mcg Respimat with refill (soft mist inhaler)
Tiogiva 18mcg capsules with device (DPI)
Tiogiva 18mcg capsules with Vertical-Haler (DPI)

Umeclidinium

Incruse Ellipta 55mcg (DPI)

LAMA: Long-acting muscarinic antagonist; NICE: National Institute for Health and Care Excellence; **BTS:** British Thoracic Society; **SIGN**: Scottish Intercollegiate Guidelines; **DPI:** dry powder inhaler; mcg: micrograms; **pMDI:** pressurised, metered-dose inhaler.

1. National Institute for Health and Care Excellence, British Thoracic Society & Scottish Intercollegiate Guidelines Network, 2025. *Inhaled corticosteroid doses for the BTS, NICE and SIGN asthma guideline*, 12 November 2025. Available at: https://www.nice.org.uk/guidance/ng245/resources/inhaled-corticosteroid-doses-for-the-bts-nice-and-sign-asthma-guideline-pdf-13558148029 [Last Accessed: April 2026].
2. RightBreathe. Available at: https://www.rightbreathe.com [Last Accessed: Aprill 2026].

LABA/LAMA Inhalers Included in the Searches

A comprehensive list of all currently marketed inhalers that are included in the searches are listed below, this list has been verified using NICE/BTS/SIGN and Rightbreathe.[1,2]

Inhalers are selected by both brand and generic name.

Aclidinium/formoterol

Duaklir 340mcg/12mcg (DPI)

Glycopyrronium/Formoterol

Bevespi Aerosphere 7.2mcg/ 5mcg (pMDI)

Indacaterol/glycopyrronium

Ultibro Breezhaler 85mcg/ 43mcg capsules with device (DPI) + refill

Tiotropium/olodaterol

Spiolto Respimat 2.5mcg/ 2.5mcg (soft mist inhaler) + refill

Umeclidinium/vilanterol

Anoro Ellipta 55mcg/ 22mcg (DPI)

LABA: Long-acting β2-agonist; LAMA: Long-acting muscarinic antagonist; NICE: National Institute for Health and Care Excellence; **BTS:** British Thoracic Society; **SIGN**: Scottish Intercollegiate Guidelines; **DPI:** dry powder inhaler; mcg: micrograms; **pMDI:** pressurised, metered-dose inhaler.

1. National Institute for Health and Care Excellence, British Thoracic Society & Scottish Intercollegiate Guidelines Network, 2025. *Inhaled corticosteroid doses for the BTS, NICE and SIGN asthma guideline*, 12 November 2025. Available at: https://www.nice.org.uk/guidance/ng245/resources/inhaled-corticosteroid-doses-for-the-bts-nice-and-sign-asthma-guideline-pdf-13558148029 [Last Accessed: April 2026].
2. RightBreathe. Available at: https://www.rightbreathe.com [Last Accessed: Aprill 2026].

ICS/LABA Inhalers Included in the Searches

Inhalers (selected by both brand & generic) have been included even where they don't hold a license for COPD, to capture all patients with COPD prescribed ICS/LABAs.

Fluticasone/salmeterol

AirFluSal 125mcg/25mcg (pMDI)
AirFluSal 250mcg/25mcg (pMDI)
AirFluSal Forspiro 500mcg/50mcg (DPI)
Aloflute 125mcg/25mcg (pMDI)
Aloflute 250mcg/25mcg (pMDI)
Avenor 125mcg/25mg (pMDI)
Avenor 250mcg/25mcg (pMDI)
Combisal 125mcg/25mg (pMDI)
Combisal 250mcg/25mcg (pMDI)
Fixkoh Airmaster 250mcg/50mcg (DPI)
Fixkoh Airmaster 500mcg/50mcg (DPI)
Fusacomb Easyhaler 250mcg/50mcg (DPI)
Fusacomb Easyhaler 500mcg/50mcg (DPI)
Sereflo 125mcg/25mcg (pMDI)
Sereflo 250mcg/25mcg (pMDI)
Sereflo Ciphaler 500mcg/50mcg (DPI)
Sereflo Ciphaler 250mcg/50mcg (DPI)
Seretide 125 Evohaler 125mcg/25mcg (pMDI)
Seretide 250mcg Evohaler (pMDI)
Seretide 250 Accuhaler 250mcg/50mcg (DPI)
Seretide 500mcg Accuhaler (DPI)
Sirdupla 125mcg/25mcg (pMDI)
Sirdupla 250mcg/25mcg (pMDI)
Stalpex 500mcg/50mcg (DPI)

Fluticasone/vilanterol

Relvar Ellipta 92mcg/22mcg (DPI)
Relvar Ellipta 184mct/22mcg (DPI)

Fluticasone/formoterol

Flutiform 125mcg/5mcg (pMDI)
Flutiform 250mcg/10mcg (pMDI)

Budesonide/formoterol

DuoResp Spiromax 160mcg/4.5mcg (DPI)
DuoResp Spiromax 320mcg/9mcg (DPI)
Fobumix Easyhaler 160mcg/4.5mcg (DPI)
Fobumix Easyhaler 320mcg/9mcg (DPI)
Symbicort 200mcg/6mcg (pMDI)
Symbicort 200mcg/6mcg Turbohaler (DPI)
Symbicort 400mcg/12mcg Turbohaler (DPI)
WockAIR 160mcg/4.5mcg (DPI)
WockAIR 320mcg/9mcg (DPI)

Beclometasone/formoterol

Bibecfo 100mcg/6mcg (pMDI)
Bibecfo 200mcg/6mcg (pMDI)
Fostair (beclometasone/formoterol) 100mcg/6mcg (pMDI)
Fostair (beclometasone/formoterol) 200mcg/6mcg (pMDI)
Fostair NEXThaler (beclometasone/formoterol) 100mcg/6mcg (DPI)
Fostair NEXThaler (beclometasone/formoterol) 200mcg/6mcg (DPI)
Luforbec 100mcg/6mcg (pMDI)
Luforbec 200mcg/6mcg (pMDI)
Proxor 100mcg/6mcg (pMDI)
Proxor 200mcg/6mcg (pMDI)
**Vivaire 100mcg/6mcg (pMDI)
**Vivaire 200mcg/6mcg (pMDI)

ICS: inhaled corticosteroid; LABA: Long-acting β2-agonist; **DPI:** dry powder inhaler; mcg: micrograms; **pMDI:** pressurised, metered-dose inhaler.
**Vivaire discontinued, but stocks still available in 2026 so included in searches

Oral Antibiotics & Oral Corticosteroids

Search cohorts 1b and 2b identify patients with ≥2 moderate exacerbations of COPD; defined as **≥2 oral corticosteroid prescriptions**, and/or **≥2 oral antibiotic prescriptions**.

Oral formulations of the antibiotics and corticosteroids included in the searches are listed below.

Please note – issues of oral antibiotics/OCS in COPD patients are used as a marker of moderate exacerbations. Please check in the patient record that they have been prescribed for COPD and not an alternative indication.

Oral Antibiotics

- Amoxicillin
- Clarithromycin
- Co-amoxiclav
- Co-trimoxazole
- Doxycycline

Oral Corticosteroids

- Prednisolone
- Prednisone
- Dexamethasone

OCS: oral corticosteroid

Key Differences in Search Construction

When building inhaler searches across clinical systems, the methodology differs due to how each system structures medication data.

EMIS Web

- The searches are built to identify only active prescription status
- Only prescriptions that are both active and issued within the last 4 months are included

SystmOne

- The searches are built using issue date
- Inhalers issued within the last 4 months will be included even if discontinued