

COPD Medications by Brand

Long-acting Bronchodilators for Treatment of COPD

Generic name	Brand Name®	Substance
<u>LONG-ACTING BETA-AGONISTS</u>		
TWICE DAILY		
Arformoterol tartate	Brovana	solution*
Formoterol fumarate	Perforomist	solution*
Formoterol fumarate	Foradil Aerolizer	aerosol
Salmeterol xinafoate	Serevent Diskus	dry powder
ONCE DAILY		
Indacaterol	Arcapta Neohaler	dry powder
Olodaterol	Striverdi Respimat	soft mist
<u>LONG-ACTING MUSCARINIC ANTAGONISTS</u>		
TWICE DAILY		
Aclidinium	Tudorza Pressair	dry powder
Glycopyrrolate	Seebri Neohaler†	dry powder
ONCE DAILY		
Tiotropium	Spiriva HandiHaler	dry powder
	Spiriva Respimat	soft mist
Umeclidinium	Incruse Ellipta	dry powder

†Used in a different dose once daily outside of the U.S.

*solutions are used in nebulizers. All other medications are inhaled with hand-held device

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Long-acting Combination Medications for Treatment of COPD

Generic name	Brand Name®	Substance
<u>INHALED LONG-ACTING BETA-AGONIST AND LONG-ACTING MUSCARINIC ANTAGONIST</u>		
TWICE DAILY		
Indacaterol and glycopyrrolate	Utibron Neohaler†	dry powder
Formoterol and glycopyrrolate	Bevespi Aerosphere	aerosol
ONCE DAILY		
Vilanterol and umeclidinium	Anoro Ellipta	dry powder
Olodaterol and tiotropium	Stiolto Respimat	soft mist
<u>INHALED CORTICOSTEROID AND LONG-ACTING BETA-AGONIST</u>		
TWICE DAILY		
Budesonide and formoterol	Symbicort	aerosol
Fluticasone propionate and salmeterol	Advair Diskus	dry powder
	Advair HFA	aerosol
ONCE DAILY		
Fluticasone furoate and vilanterol	Breo Ellipta	dry powder

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Action plan

A partnership program made with your health-care provider to help you stay on track with your wellness. It will have steps to take and goals to accomplish.

Air sacs (alveoli)

Tiny balloon-like sacs, located deep within the lungs. From these sacs, oxygen and carbon dioxide are passed to the blood by tiny vessels (capillaries). Note: alveoli means “bunches of grapes” in Italian.

Airways (bronchial tubes)

From the windpipe into the lungs, through which air passes during breathing.

Alpha-1 antitrypsin

A kind of protein that helps to keep the elasticity of tissue in the lung. In some people, an inherited deficiency of this protein leads to the development of emphysema.

Antibiotics

Medications that are effective against infections, usually this is bacteria, but some special antibiotics are made to fight viruses.

Anticholinergics

Medications that have an effect upon smooth muscle in the airways. When inhaled into the lung, anticholinergics decrease muscle spasms or tightening of the airways.

Antiinflammatories

A class of drugs, often corticosteroids, used to help reduce inflammation and swelling of the airways.

Beta₂-agonists

These medications can be short-term or long-term and work to open the airways by relaxing tight muscles around them.

Bronchiectasis

Abnormal permanent dilation of the airways that can lead to repeated infections. This is only seen on a CT scan.

Bronchioles

Small airways in the lung; they connect the bronchial tubes and the air sacs.

Bronchiolitis

Inflammation and scarring of the small airways.

Bronchodilators

Medications that relieve the tightening of the airways and that are in pill form or inhaled form. They include anticholinergics and short-term and long-term beta₂-agonists.

Carbon dioxide (CO₂)

A waste product of body metabolism that is removed only by the lungs when breathed out. It gets transferred from the blood through the air sacs in the lung.

Chronic bronchitis

An inflammation, or constant swelling and irritation, of the airways that causes increased production of mucus. It is considered chronic (or long-term) when a person is coughing and producing excess mucus for most days of the month for at least 3 months of a year for 2 or more years in a row.

COPD (chronic obstructive pulmonary disease)

A term to describe two common diseases that result in airflow obstruction: emphysema and chronic bronchitis. Patients may experience either or both of these conditions.

COPD Exacerbation (Flare-up)

A flare-up or a bad attack that is usually caused by an infection in the lung, but it is not always known why there is a worsening of symptoms. Usually accompanied by more mucus, coughing, and breathlessness.

Corticosteroids (glucocorticoids, steroids)

Medications that work to decrease inflammation and swelling of the airways. They can be taken in pill form or inhaled. Corticosteroids are not to be confused with anabolic steroids used by athletes and others to build muscles.

Diaphragm

The large muscle underneath the lungs that moves down when breathing in to allow air with fresh oxygen to be pulled into the lungs and moves up to force “used air” with carbon dioxide out of the lungs when breathing out. It is the main breathing muscle in the body.

Emphysema

Part of COPD that involves the tiny air sacs in the lungs (alveoli). In emphysema, the lungs lose elasticity, which causes the air sacs to become enlarged, making breathing difficult. In advanced emphysema there are large empty spaces in the lung.

Lung volume reduction surgery

An operation in which damaged parts of the lung are removed, allowing the healthy, remaining parts to work better and fill the space inside the rib cage.

Mucus (phlegm)

A slippery substance produced by certain membranes in the body. In normal, healthy people, mucus moistens and protects these mucous membranes. However, in COPD, too much mucus is produced in the lungs, resulting in clogging, blocking, and coughing, which make breathing more difficult.

Nebulizers (atomizer)

A machine that can produce an extremely fine spray for deep penetration of medicine into the lungs.

Oxygen (O₂)

A gas that provides the body with energy. When breathed in, it is pulled into the lungs, where it is transferred to the blood through the air sacs (alveoli). People who do not get enough oxygen into their systems may need oxygen therapy.

Pulmonary rehabilitation

A multidisciplinary program of exercise, education and breathing retraining meant to help people with COPD stay conditioned, reduce symptoms of breathlessness, and improve lung function and attitude in order to improve quality of life.

Pulmonologist (pulmonary doctor)

A medical doctor who has special training about lungs and treatment of lung disorders.

Reactive airway disease

Often referred to as asthma, people with this disease have airways that are very sensitive to irritants, causing tightening of muscles and more mucus production. Some people with COPD also have reactive airway disease.

Spirometry (pulmonary function tests)

A way of measuring the amount of air entering and leaving the lungs. This is the one way doctors and other health-care providers can diagnose COPD.

Windpipe (trachea)

Air flows through this tube from the mouth and nose, down the throat, and into the lungs.