

Use of a Nebulized LAMA for the Treatment of COPD

FOR CLINICIANS



LAMA IS AN ACCEPTED FIRST-LINE AGENT FOR ANY SEVERITY OF COPD THAT REQUIRES A CONTROLLER AGENT.¹

INITIAL COPD TREATMENT

Short-acting
bronchodilator

LAMA or LABA

LAMA

LAMA or combination
(LAMA + LABA or LABA + ICS)

No or one flare-up but
no hospital stay needed

Two or more flare-ups or a hospital stay is
needed for one or more

There are 4 types of inhaled medication delivery devices.

Delivery of medication into the lungs varies greatly by device type²:

- Pressurized metered-dose inhalers
- Soft mist nebulizers
- Dry powder inhalers
- Traditional nebulizer



36%

of people with COPD worry they
are not taking inhaled medicine
correctly, and

77%

wonder if their
medicine is effective.³

To learn more, go to chestfoundation.org

Developed by the American College of Chest Physicians with support from Viatrix and Theravance Biopharma.

Read the CHEST Foundation Patient Education disclosure at <http://foundation.chestnet.org/patient-education-disclosure>

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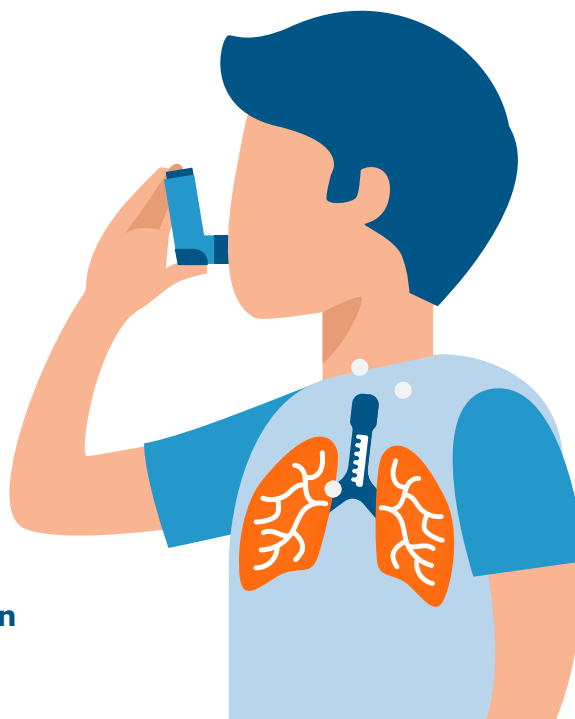


Many people with COPD who use inhalers make mistakes, even when they feel confident they know how to use the device.⁴

The efficacy of different delivery devices can be affected by:

- Cognition⁵
- Older age⁵
- Musculoskeletal issues¹
- Inspiratory flow rate⁶

Incorrect use of an inhaler is common and related to an increased risk of hospitalization and needing steroids or antibiotics.⁵



Nebulized LAMA has been available since 2017.^{7,8}

80%

people with COPD who use a nebulizer said it was better than just an inhaler.

- The benefits outweighed any inconveniences (79%).
- Quality of life improved after beginning a nebulized medicine (75%).⁹

Nebulized medications can have greater efficacy than dry powder inhalers for people with COPD who have low peak inspiratory flow.¹⁰

References: 1. Global Initiative for Chronic Lung Disease. https://goldcopd.org/wp-content/uploads/2019/12/GOLD-2020-FINAL-ver1.2-03Dec19_WMV.pdf. 2. American Association for Respiratory Care. <https://www.aarc.org/wp-content/uploads/2018/01/aerosol-guide-for-hcp-3rd.pdf>. 3. Hanania NA, et al. *Chronic Obstr Pulm Dis*. 2018;5:111-123. 4. Souza ML, et al. *J Bras Pneumol*. 2009;35(9):824-831. 5. Melani AS, et al. *Respir Med*. 2011;105(6):930-938. 6. Quinet P, et al. *Ann Phys Rehabil Med*. 2010;53(2):69-76. 7. Drugs.com. <https://www.drugs.com/history/lonhala-magnair.html>. 8. US Food and Drug Administration. https://www.accessdata.fda.gov/drug-satfda_docs/nda/2018/210598Orig1s000TOC.cfm. 9. Sharafkhaneh A, et al. *COPD*. 2013;10(4):482-492. 10. Mahler DA, et al. *J Aerosol Med Pulm Drug Deliv*. 2014;27(2):103-109.

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