Exacerbation Reduction and Improved Quality of Life in Asthma with Extrafine Formulation Single-Inhaler Triple Therapy (efSITT): Six-Month Results of the TriMaximize Study

¹Translational Lung Research Center Heidelberg, Heidelberg, ²Chiesi GmbH, Hamburg; ³King's College London, ⁴Department of Respiratory Medicine, Copenhagen University Hospital Hvidovre, ⁵Karl Landsteiner Institute for Clinical and Experimental Pneumology, Clinic Hietzing, Vienna, ⁶Hospital de la Santa Creu i Sant Pau, Barcelona, ⁷Hôpital Arnaud de Villeneuve, University of Montpellier, ⁸Specialized Practice for Pulmonary Medicine, Leipzig. *Corresponding author: ch.gessner@pneumologe-leipzig.de

BACKGROUND:

The TriMaximize study was designed to observe patients who have switched to extrafine formulation single-inhaler triple therapy consisting of **beclomethasone dipropionate/formoterol** fumarate/glycopyrronium (BDP/FF/G) in a real-world setting over a period of one to three years.

METHODS:

- This is a multinational, observational study that follows patients with asthma being prescribed efSITT. Patients were recruited at 125 sites across six countries (DE, UK, AT, DK, FR and ES). Here we present the data from the interim analysis after 6 months of observation.
- Descriptive analyses of Health-Related Quality of Life (HRQoL) evaluated by Mini Asthma Quality of Life Questionnaire (Mini AQLQ)¹ and exacerbation rates were performed.

Table 1. Baseline characteristics of patients (n=1090).		
Age, mean years (±SD)		58 (15)
Sex, n (%)	Female	690 (63.3)
	Male	400 (36.7)
BMI (kg/m ²), mean (±SD)		29.3 (7.8)
Smoking status, n (%)	Former smoker	340 (31.2)
	Current smoker	202 (18.5)
Pack years, mean (±SD)	Former smoker	19.1 (15.5)
	Current smoker	24.9 (15.5)
Time since stopped smoking, years (±SD)		14.8 (12.5)
Time since diagnosis at baseline visit, years (±SD) 1		14.4 (14.1)
FEV_1 % predicted at baseline visit, mean (±SD)		67.08 (16.96)
Exacerbation rate in the past year, mean (±SD)		1.8 (1.7)
Asthma maintenance treatment before switch to efSITT, n (%)	ICS/LABA (fixed)	787 (72.2)
	ICS/LABA (open)	34 (3.1)
	ICS/LABA/LAMA (fixed)	17 (1.6)
	ICS/LABA/LAMA (open)	252 (23.1)
Classification according to GINA criteria, n (%)	GINA Step 4	878 (82.6)
	GINA Step 5	185 (17.4)

Reference: of the Mini Asthma Quality of Life Questionnaire, EF Juniper, GH Guyatt, FM Cox, PJ Ferrie, pean Respiratory Journal 1999 14: 32-38: DOI: 10.1034/i.1399-3003.1999.14a08.x , RR, CSU, WP, VP, AB and CG have received fees for conducting the study. VB, DN and CF are employees of Chiesi GmbH



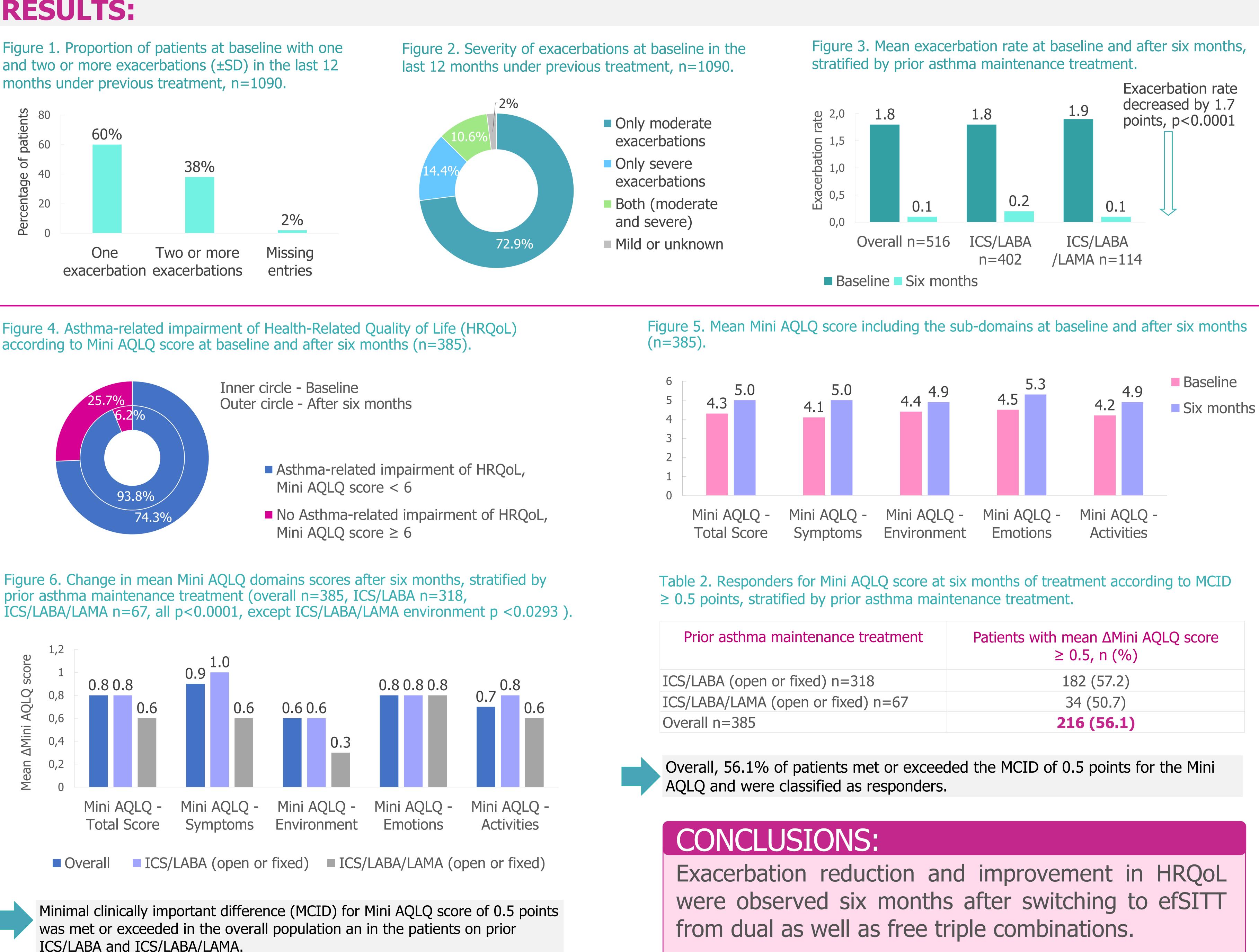
Scan to download the poster.

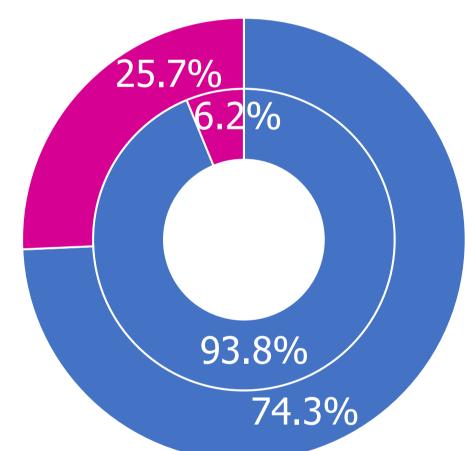
F. Trinkmann¹, V. Bogoevska², D. Nachtigall², R. Russell³, C. Suppli Ulrik⁴, W. Pohl⁵, V. Plaza⁶, A. Bourdin⁷, C. Fritz², C. Gessner^{8*}

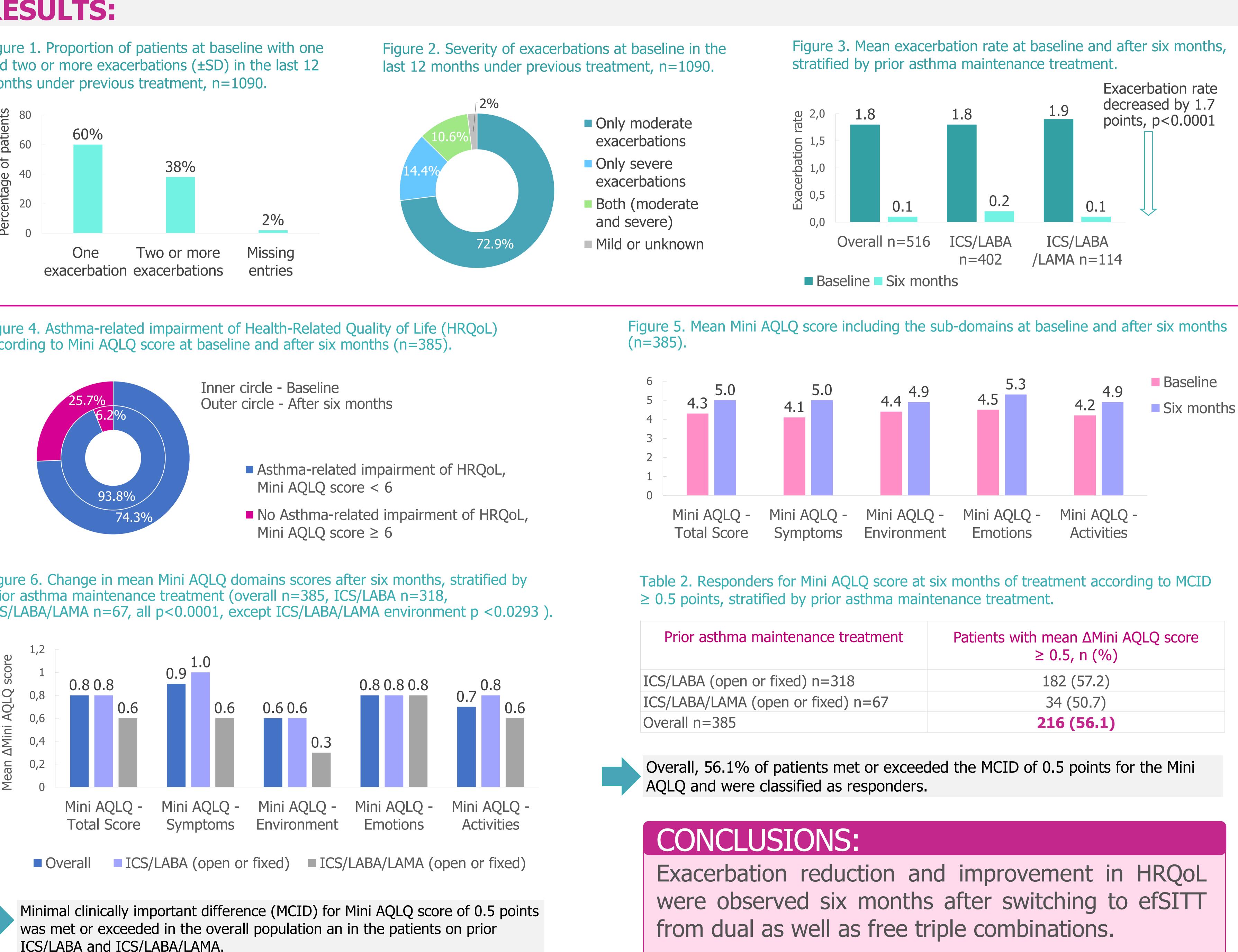
RESULTS:



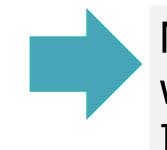
Figure 1. Proportion of patients at baseline with one and two or more exacerbations (±SD) in the last 12 months under previous treatment, n=1090.







ICS/LABA and ICS/LABA/LAMA.





TRIMAXIMIZE

Genesi

ce treatment	Patients with mean Δ Mini AQLQ score ≥ 0.5 , n (%)
=318	182 (57.2)
xed) n=67	34 (50.7)
	216 (56.1)