Improvement in Lung Function after Six Months of Treatment with Extrafine Formulation Single-Inhaler Triple Therapy (efSITT) in Patients with Asthma - TriMaximize Study



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BACKGROUND:

• The TriMaximize study observes patients who have switched to extrafine formulation single-inhaler triple therapy (efSITT) consisting of **beclomethasone dipropionate/formoterol fumarate/glycopyrronium (BDP/FF/G)** in a real-world setting. The clinical efficacy and safety of efSITT has already been shown in clinical trials¹.

METHODS:

- This is a multinational, observational study that follows patients with asthma being prescribed efSITT over a period of one to three years. 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.
- Pre-bronchodilator lung function was measured by spirometry and body plethysmography at baseline and after six months of treatment with efSITT along with additional descriptive analyses.

Table 1. Baseline characteristics of patients (n=1090).

	58 (15)
male	690 (63.3)
le	400 (36.7)
	29.3 (7.8)
mer smoker	340 (31.2)
rrent smoker	202 (18.5)
mer smoker	19.1 (15.5)
rrent smoker	24.9 (15.5)
	14.8 (12.5)
rs (±SD)	14.4 (14.1)
(±SD)	67.08 (16.96)
S/LABA*	67.73 (16.56)
S/LABA/LAMA*	64.97 (18.10)
(±SD)	1.8 (1.7)
S/LABA*	821 (75.3)
S/LABA/LAMA*	269 (24.7)
NA Step 4	878 (82.6)
VA Step 5	185 (17.4)
	male le mer smoker rent smoker mer smoker rent smoker rent smoker (±SD) (LABA* (LABA/LAMA*

RESULTS:

Table 2. Mean change from baseline in lung function parameters after six months of treatment with BDP/FF/G, stratified by prior asthma maintenance treatment.

Parameters	Overall population	Prior ICS/LABA*	Prior ICS/LABA/LAMA*
FEV ₁ (mL) (±SD)	130 (460) p<0.0001 n=389	150 (440) p<0.0001 n=312	70 (540) p<0.2797 n=77
FEV ₁ (% of predicted) (±SD)	3.95 (13.51) p<0.0001 n=338	4.09 (13.18) p<0.0001 n=278	3.43 (14.85) p<0.0575 n=70
RV/TLC (% of predicted) (±SD)	-7.79 (39.33) p=0.0017 n=256	-9.07 (37.52) p=0.0007 n=205	-2.64 (45.95) p=0.6828 n=51
sRtot (% of predicted) (±SD)	-19.31 (84.52) p<0.0163 n=114	-28.08 (80.04) p<0.0011 n=92	17.37 (94.49) p=0.3983 n=22
MEF 25-75 (L/s) (±SD)	0.10 (0.98) p=0.2430 n=142	0.12 (0.85) p=0.1387 n=112	0.01 (1.38) p=0.9656 n=30

For the mean change only patients with spirometry and/or body plethysmography performed at baseline and month six were included (a total of 453 patients, 355 were previously treated with ICS/LABA and 98 patients with ICS/LABA/LAMA).

*(fixed or open); FEV_1 - forced expiratory volume in 1st second; RV/TLC - residual volume to total lung capacity ratio; sRtot - total specific resistance; MEF 25-75 - maximum expiratory flow at 25-75% of forced vital capacity (FVC); ICS - Inhaled corticosteroid; LABA - Long-acting beta2-agonist; LAMA - Long-acting muscarinic antagonist.

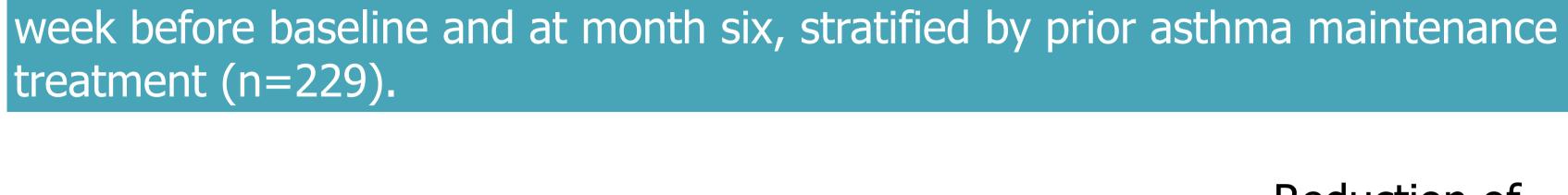


Figure 1. Mean change in total number of puffs of rescue medication in the

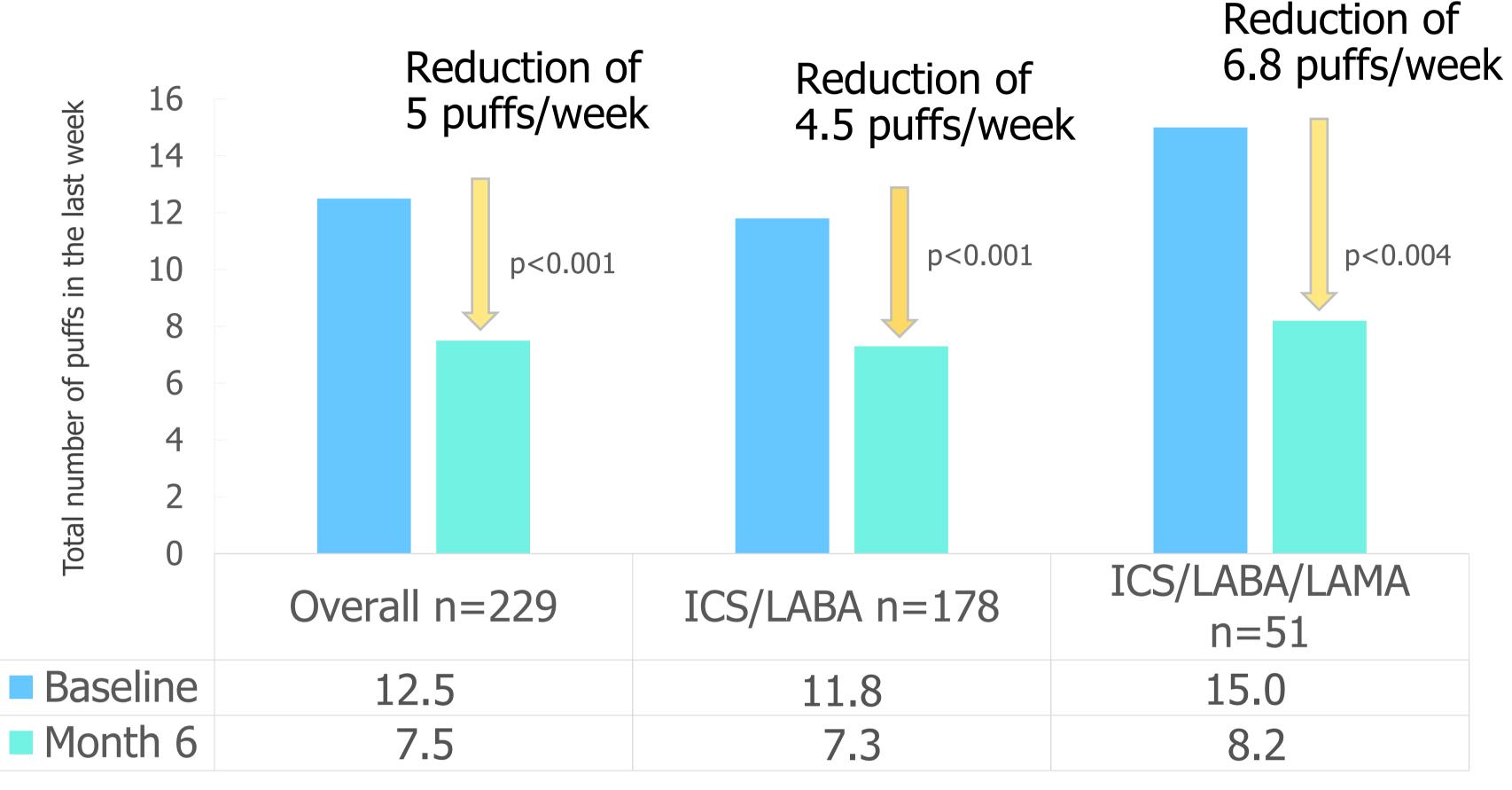
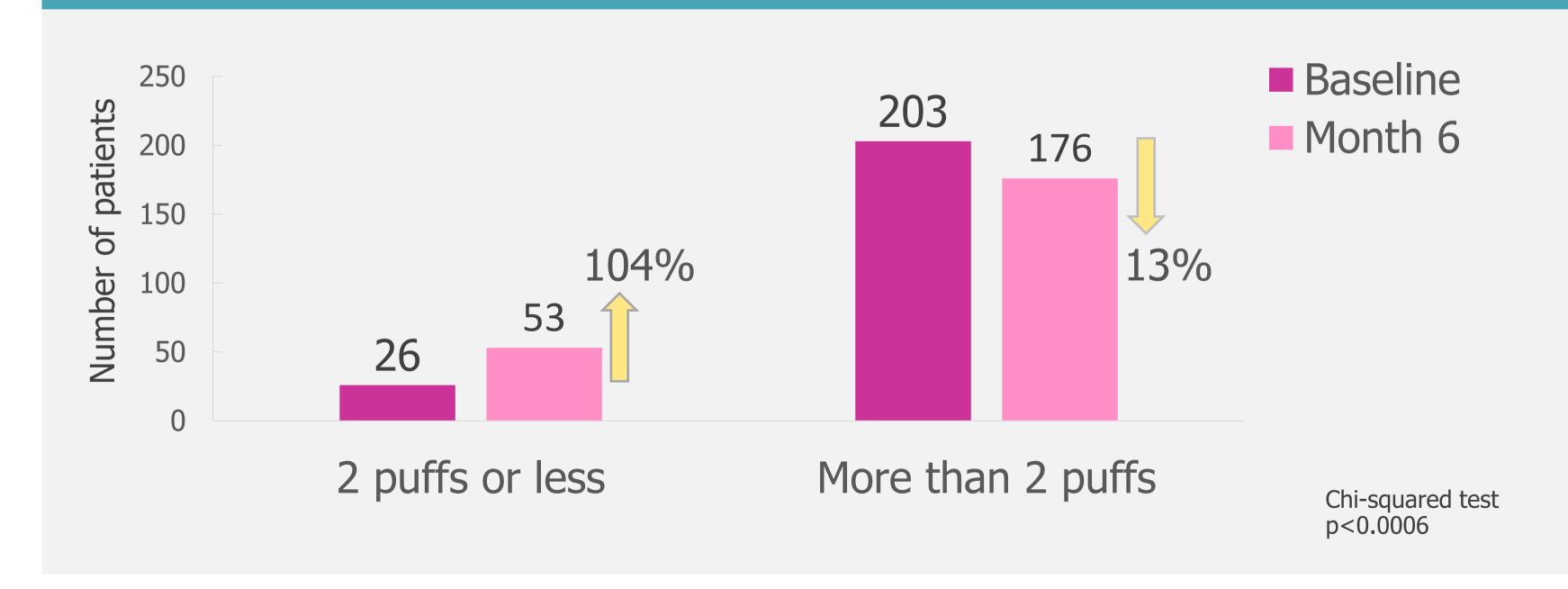


Figure 2. Number of patients taking a rescue medication in the previous week comparing baseline and month six for high and low users (n=229).



CONCLUSION:

Significant lung function improvement and reduction in rescue medication use were observed in asthma patients six months after switching to efSITT. This especially includes parameters of peripheral obstruction (sRtot) and hyperinflation (RV/TLC).



References

¹ Virchow J.C. et al., Single inhaler extrafine triple therapy in uncontrolled asthma (TRIMARAN and TRIGGER): two double-blind, parallel-group, randomised controlled phase 3 trials. The Lancet, 2019. 394(10210): p. 1737-1749.

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*(fixed or open)