

COPD [2017]

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Abstracts

Are closed triple combos expected to change treatment dynamics?

New treatment guidelines look set to change the way in which COPD is treated. New guidelines from the Global Initiative for Chronic Obstructive Lung Disease (GOLD) recommend LABA/LAMAs as first line therapy in symptomatic patients regardless of exacerbation risk, and KOLs agree. LABA/LAMA marketing companies set to benefit include AstraZeneca, Boehringer Ingelheim, GSK and Novartis, but which company will take the spoils. Meanwhile, how will closed triple ICS/LABA/LAMA combination therapies fair when approved? Do they offer real clinical benefits, and which pipeline programmes (from GSK, Chiesi and AstraZeneca) do KOLs believe has the edge over other rivals? Experts also give their views on how anti-IL5 mAbs are likely to fair in the COPD treatment paradigm, as well as provide insights on next-generation therapies and new mechanisms of action.

6 KOLs from the US and 6 KOLs from Europe offer their candid insights on these issues and more.

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The key business questions answered >

The key KOL quotes >

See the therapies covered >

Find out who the 6 EU & 6 US KOLs are >

Review an extract from the report - 1 drug profile >

Top Takeaways

Is it all change in the COPD treatment paradigm? Three products have dominated the COPD treatment landscape over the past decade, so how quickly will these products lose ground to the newer single and combination therapies entering the market?

What impact will new Global Initiative for Chronic Obstructive Lung Disease (GOLD) guidelines have on treatment practice? New guidelines on COPD patient assessment, segmentation and treatment were published in 2017, but what will be the 'real-world' impact and which companies are set to benefit?

What does the future hold for disease modifying treatments? Do any of the pipeline programmes offer the potential for disease modification, or do KOLs believe it's too early to say?

Do the new GOLD guidelines glitter for combo LABA/LAMA brands? With five LABA/LAMA combo brands all vying for a slice of the action, which treatments do KOLs prefer and how will usage evolve over the coming years?

Are fixed-dose triple combination therapies the answer to remaining clinical unmet needs? ICS/LABA/LAMA combos are coming, and some will be launched by 2018. Is it all about improved outcomes, or is it simply about improved patient convenience? KOLs speak out.

Seretide/Advair generics are here, but what impact will they have in the treatment of COPD? Generic versions of GSK's Seretide/Advair are expected to penetrate the market in the near term. Will the potential for lowering the costs of therapy win the argument, or has treatment guidance changed before their impact can be felt?

Quotes

"The once daily LABA/LAMAs are pretty much similar as far as I can judge. Lung function, symptoms, prevention of exacerbations, they're all pretty similar, although no one's done a head-to-head comparison." European Key Opinion Leader

“Patients will benefit because they will have just one device. There will be more room to add other medications without endangering the compliance. Unfortunately when you have all medications in just one device, there will be a lot of interest from many physicians and even patients, even for cases in which it's not recommended.” US Key Opinion Leader

Sample of therapies covered

Marketed Therapies

Long-acting muscarinic antagonists (LAMAs)

Spiriva (tiotropium; Boehringer Ingelheim)

Seebri (glycopyrronium; Novartis)

Eklira/Tudorza (aclidinium; AstraZeneca/Takeda)

Plus 3 more - download the full list now >

LAMA/LABA combinations

Stiolto/Spiolto (tiotropium/olodaterol; Boehringer Ingelheim)

Ultibro/Utibron (glycopyrronium/indacaterol; Novartis)

Eklira/Tudorza (aclidinium/formoterol; AstraZeneca/Takeda)

Plus 2 more - download the full list now >

ICS/LABA combinations

Seretide/Advair (fluticasone propionate/salmeterol; GSK)

Relvar Ellipta/Breo Ellipta (fluticasone furoate/vilanterol; GSK)

Symbicort (budesonide/formoterol; AstraZeneca)

Pipeline Therapies (Phase II/III)

benralizumab (AstraZeneca)

mepolizumab (GSK)

budesonide/formoterol/glycopyrrolate (PT010; AstraZeneca)

beclometasone/formoterol/glycopyrrolate (CHF5993; Chiesi)

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Sample of KOLs interviewed

KOLs from North America

Professor Antonio Anzueto. Chief of the Pulmonary Disease Section, South Texas Veterans Health Care System and Medical Director of the Pulmonary Function Laboratory at the University Hospital in San Antonio.

Professor Richard Casaburi. Professor and Chief, Division of Respiratory and Critical Care Physiology and Medicine, University of California at Los Angeles Medical Center.

Dr. Carlos Martinez. Assistant Professor, Department of Internal Medicine and Medical Director, Pulmonary Rehabilitation Services, University of Michigan.

KOLs from Europe

Professor Fan Chung. Professor of Respiratory Medicine and Head of Experimental Studies Medicine at National Heart & Lung Institute, Imperial College London, UK.

Professor Peter J. Barnes. Professor of Thoracic Medicine and Head of Respiratory Medicine at the National Heart and Lung Institute and Honorary Consultant Physician at Royal Brompton Hospital, London, UK

Professor Nicolas Roche. Professor of Respiratory Medicine, Service de Pneumologie et Réanimation, Hôpital de l'Hôtel Dieu 1, Paris.

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