

Once-daily triple-Tx improves lung function, HRQoL in COPD

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second were 142 mL and ?29 mL, for the triple therapy and ICS/LABA therapy groups, respectively; mean changes from baseline in St. George's Respiratory Questionnaire scores were ?6.6 and ?4.3 units, respectively. The between-group differences for both end points were statistically significant. For triple therapy versus dual ICS/LABA therapy there was a statistically significant reduction in moderate/severe exacerbation rates (35 percent reduction).

"These results support the benefits of single-inhaler triple therapy compared with ICS/LABA therapy in patients with advanced COPD," the authors write.

Several authors disclosed financial ties to GlaxoSmithKline, which funded the study.

More information: [Abstract](#)

[Full Text \(subscription or payment may be required\)](#)

(HealthDay)—For patients with chronic obstructive pulmonary disease (COPD), once-daily single-inhaler triple therapy is better for lung function and health-related quality of life than inhaled corticosteroid (ICS)/long-acting ?₂-agonist (LABA) therapy, according to a study published in the Aug. 15 issue of the *American Journal of Respiratory and Critical Care Medicine*.

David A. Lipson, M.D., from GlaxoSmithKline in King of Prussia, Pa., and colleagues compared the effects of once-daily triple [therapy](#) on [lung function](#) and health-related quality of life with twice-daily ICS/LABA therapy for 24 weeks as part of a randomized trial. A total of 1,810 participants were randomized to triple therapy (911 patients; fluticasone furoate/umeclidinium/vilanterol) and ICS/LABA therapy (899 patients; budesonide/formoterol). A subgroup of patients remained on blinded treatment for up to 52 weeks.

The researchers found that the mean changes from baseline in forced expiratory volume in one

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