IMPACT: InforMing the PAthway of COPD Treatment

GSK’s landmark study of the first once-daily single inhaler triple therapy in COPD: Trelegy Ellipta (FF/UMEC/VI)¹

A unique landmark study

- One of the biggest studies ever conducted in COPD (10,355 patients)¹
- First study undertaken to compare single inhaler triple therapy with its component dual therapies; all delivered once-daily in the Ellipta inhaler enabling direct comparisons to be made between the molecules in each of the medicines studied¹

Conducted to explore the effect of treatment to reduce the annual rate of moderate/severe exacerbations (‘flare ups’)¹

An exacerbation is the most common reason for hospitalisation with COPD²

Trelegy Ellipta was superior in reducing exacerbations vs both comparators¹

Primary endpoint: the annual rate of on-treatment moderate and severe exacerbations at week 52

15% reduction
Vs Breo Ellipta
p<0.001 for both comparisons
= 0.91 vs 1.07

25% reduction
Vs Anoro Ellipta
p<0.001
= 0.91 vs 1.21

 Patients in the study had experienced at least one exacerbation in the past 12 months, which is representative of around 50% of the COPD population²

Trelegy Ellipta: superiority across a range of clinically important secondary endpoints¹

Annual rate of on-treatment severe (hospitalised) exacerbations with Trelegy Ellipta compared to Breo Ellipta and Anoro Ellipta

- 13% lower
Vs Breo Ellipta
- 1%, 24% p=0.064
- 34% lower
Vs Anoro Ellipta
22%, 44% p<0.001

Lung function improvement with Trelegy Ellipta compared to Breo Ellipta and Anoro Ellipta

- 97 mL greater
Trough Breo Ellipta
p<0.001
- 54 mL greater
Vs Anoro Ellipta
p<0.001

Change from baseline at 52 weeks

Improvement in quality of life with Trelegy Ellipta compared to Breo Ellipta and Anoro Ellipta

- 1.8 units greater
St George’s Respiratory Questionnaire (SGRQ) total score
p<0.001
- 1.8 units greater
Vs Anoro Ellipta
p<0.001

The safety profile of Trelegy Ellipta was consistent with the known profile of the individual medicines and their dual combinations.¹

The most common adverse events across the treatment groups were viral upper respiratory tract infection, worsening of COPD, upper respiratory tract infection, pneumonia and headache.¹

As with all ICS-containing products approved for the treatment of COPD, there was a higher rate of pneumonia seen with the fluticasone furoate (FF) containing arms (Trelegy Ellipta and Breo Ellipta) compared to Anoro Ellipta.¹