

Introduction

COPD is a chronic respiratory disease due to inflammation and permanent and progressive obstruction of the bronchial tubes which affected 7.5% of adults over the age of 40 in France in 2016.

Treatments are based on short-acting (SAMA, SABA) or long-acting (LAMA, LABA) bronchodilators and inhaled corticosteroids (ICS) used as monotherapy or in free or fixed combination.

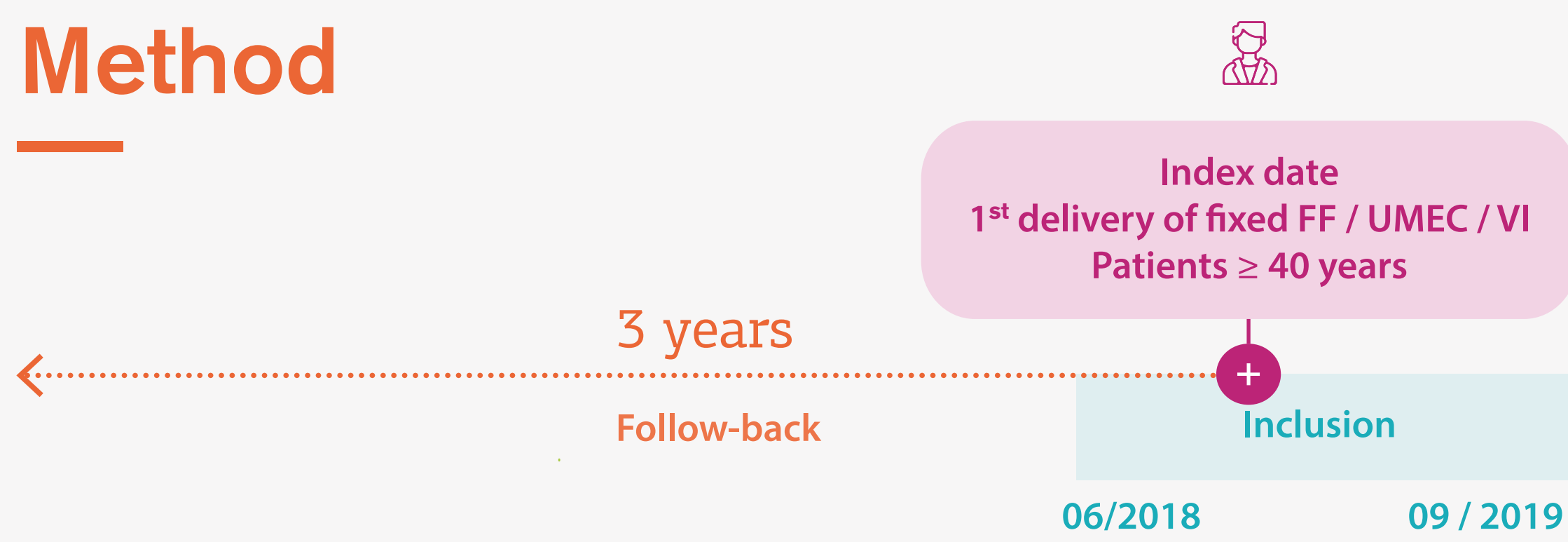
Recommendations are the escalation of treatment over the course of the disease:

- **Line 1:** monotherapy **SAMA or SABA**
- **Line 2:** monotherapy **LAMA LABA**
- **Line 3:** dual therapy **ICS / LABA LAMA / LABA**
- **Line 4:** triple therapy **ICS / LAMA / LABA**

In July 2018, a fixed triple therapy, FF / UMEC / VI, has been approved on the market¹. It should be used for patients not adequately treated by two complementary long-acting bronchodilators.

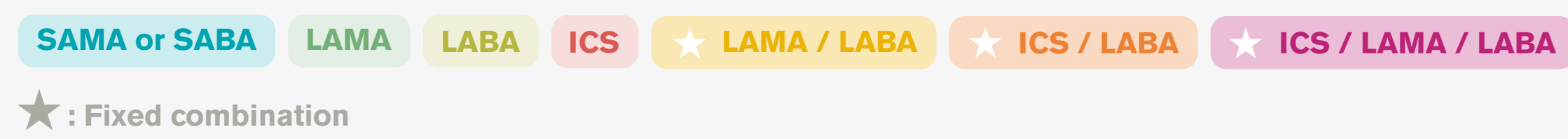
REFRAIN is a retrospective study requested by the HAS and conducted on the SNDS databases to control the proper use of FF / UMEC / VI in real life.

Method



RECONSTRUCTION OF MULTITHERAPIES:

1. First deliveries are gathered into 7 categories



2. Then an adapted Hamilton Algorithm² was used to reconstruct multitherapies (detailed in the right part of the poster).

Conclusion

Use the SNDS to identify treatments and multitherapies

Enables to describe the therapeutic pathway of almost all COPD patients in France

To answer, for example, to HAS about the correct use of a treatment

SNIIRAM study registered with the HDH on 19/11/2020 and authorised by the CNIL on 12/02/2021. (DR-2021-053 (request 920449)) - CNAM agreement signed on 21/05/2021.

DISCLOSURE

This study was funded by GlaxoSmithKline (study 210040)

BA: AgiàDOM, Astra Zeneca, GSK, NOVARTIS, BIF, CHIESI, MENARINI, SANOFI

GJ: Menarini, Astra Zeneca, Boehringer Ingelheim, Chiesi, GSK, Novartis, Pfizer

LW had received consulting fees from HEVA for the study and from Pfizer for works outside the submitted work.

AS, AP and ML are employees of HEVA, a company paid by GlaxoSmithKline to set up and realize the database analysis

LS, GN, and CP are employees of GlaxoSmithKline, and hold stocks / shares in GlaxoSmithKline

ACKNOWLEDGEMENTS

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REFERENCES

1: https://www.has-sante.fr/upload/docs/evamed/CT-16718_ELEBRATO-TREGELY_ELLIPTA_PIC_INS_Avis2_CT16718.pdf

2: Hamilton, Laurie. "Using SAS® to Identify Cancer Treatment Patterns in Administrative Claims Data." (2011).

GLOSSARY

COPD: Chronic Obstructive Pulmonary Disease

FF / UMEC / VI: Fluticasone Furoate / UMEclidinium / Vilanterol

HAS: Haute Autorité de Santé

ICS: inhaled corticosteroids

LAMA, LABA: long-acting bronchodilators

REFRAIN: pRoper usE of tRelegy elliptA IN the treatment of COPD

SAMA, SABA: short-acting bronchodilators

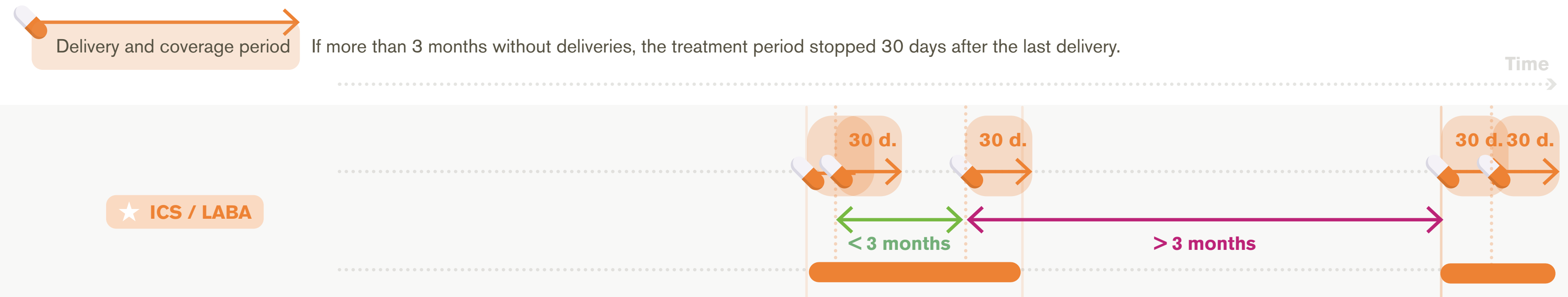
SNDS: Système National des Données de Santé

Identification of inhaled multitherapies in the SNDS: example of the REFRAIN study in COPD

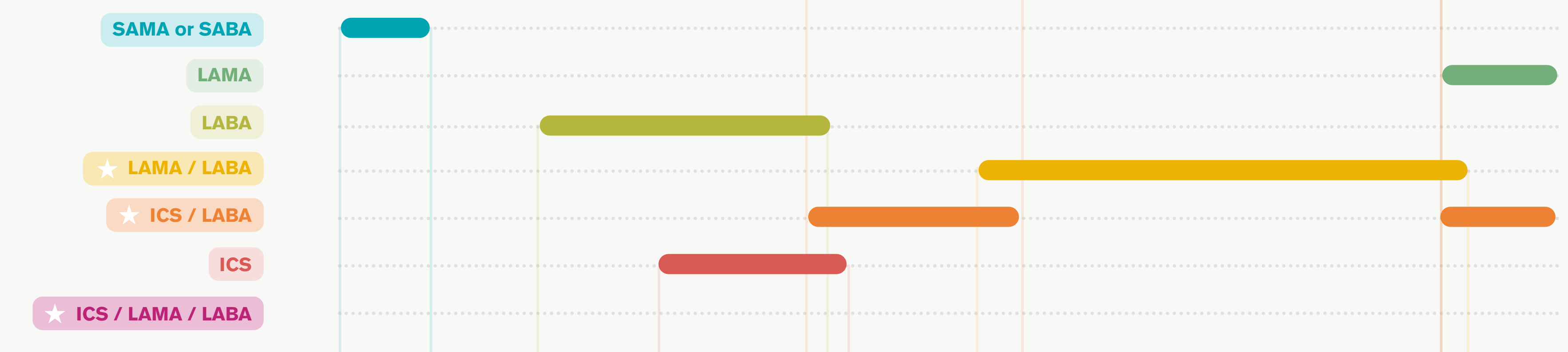


FOR EACH PATIENT: RECONSTRUCTION OF MONO, DUAL AND TRIPLE THERAPIES

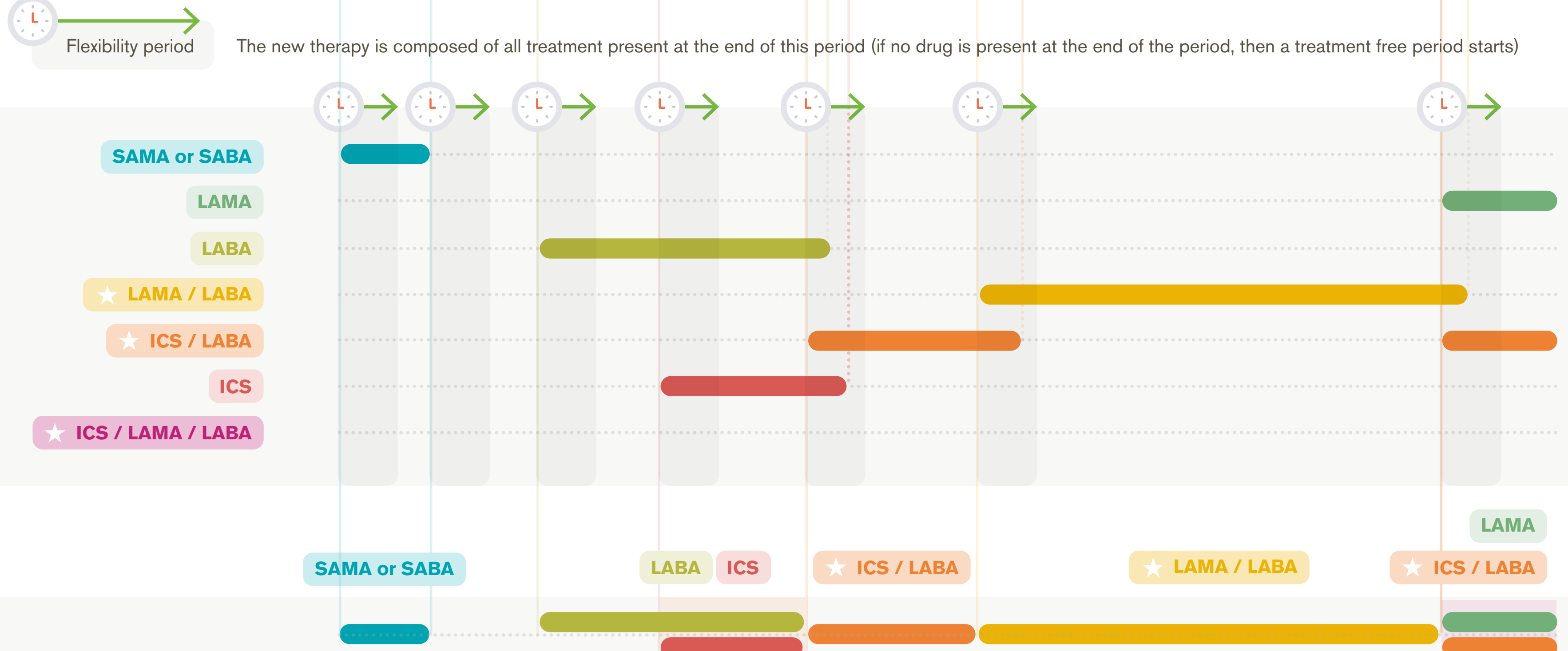
Step 1: from deliveries to periods under treatment



Results of periods under treatment for each of the 7 treatments categories:



Step 2: identify treatments given simultaneously, considering a flexibility period of 30 days



Step 3: and gather them to define free mono, dual and triple therapies



Results

PATIENTS CHARACTERISTICS

34,906 patients

61% Male

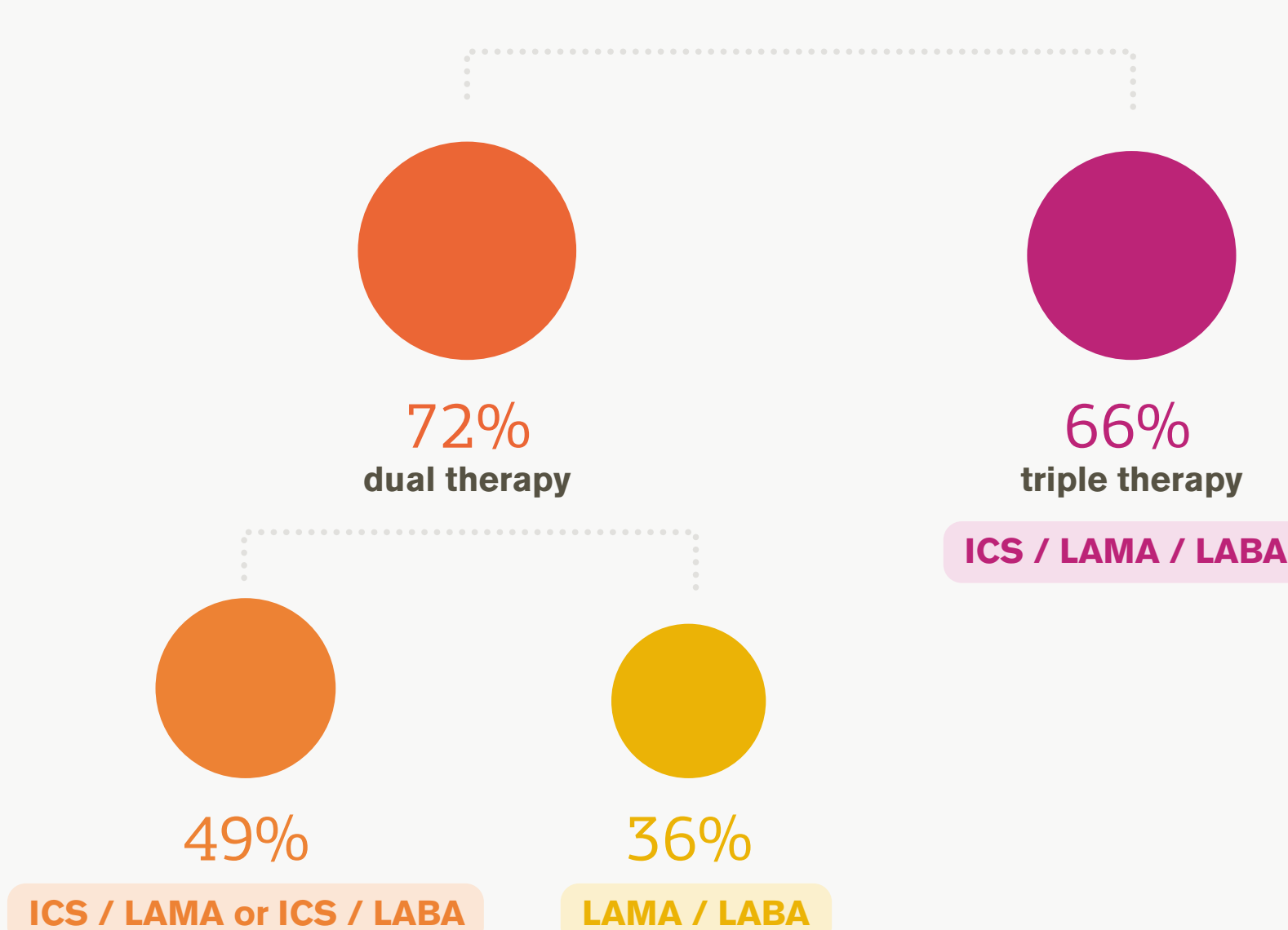
69 years old Mean age

from 20 to 25% of patients having a hospitalization for severe exacerbation (over the follow-back period)

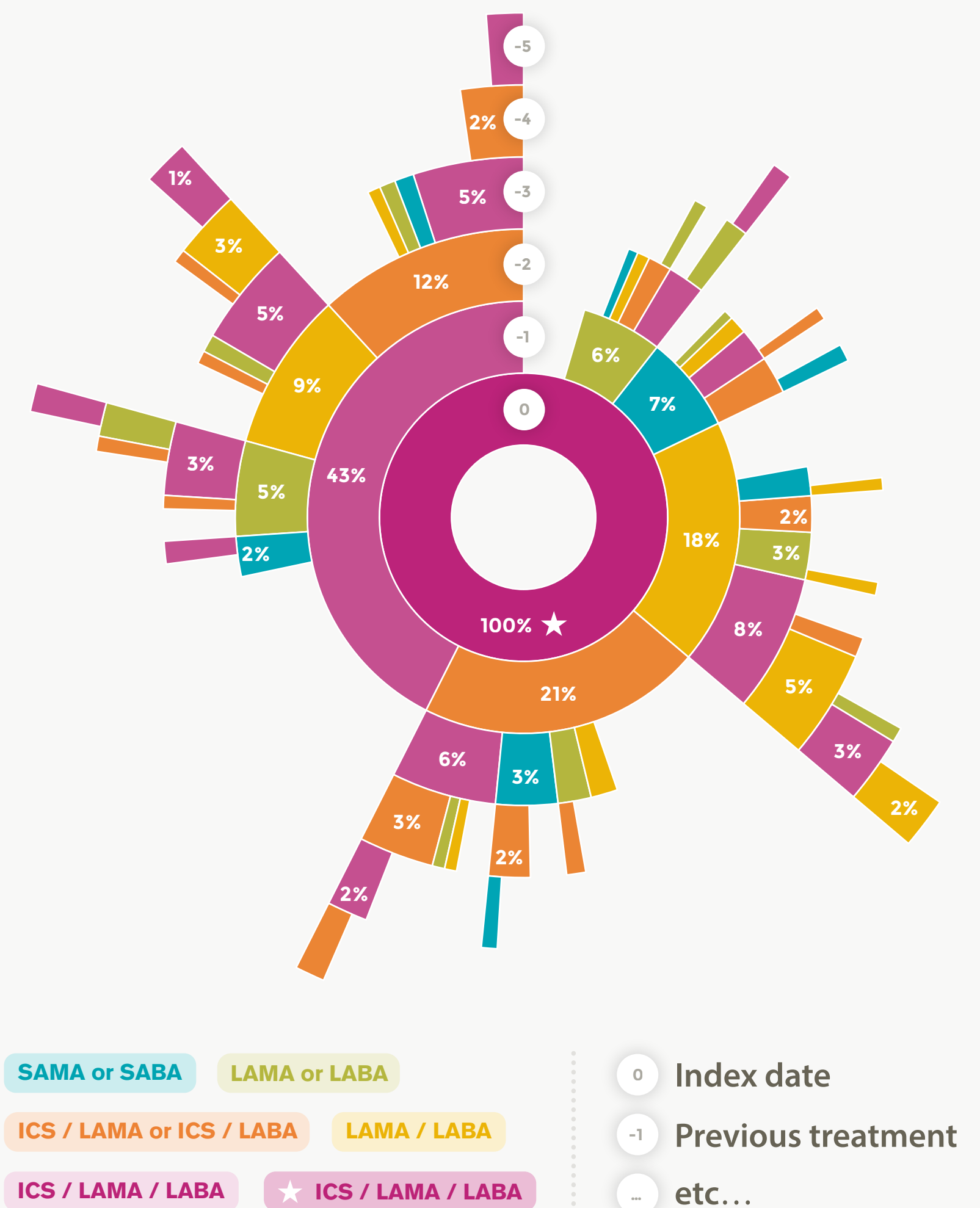
PRESENCE OF THERAPY WITHIN 3 YEARS PRIOR TO FIXED FF / UMEC / VI INITIALIZATION

92%

of patients received at least once a dual or triple therapy



TREATMENT SEQUENCES BEFORE FIXED FF / UMEC / VI INITIALIZATION:



For 43% of the patients, the last treatment before fixed FF / UMEC / VI initialization was a free triple therapy

