

# Benefits of tiotropium/olodaterol in maintenance-naïve patients with COPD: pooled analysis of TONADO®/OTEMTO®

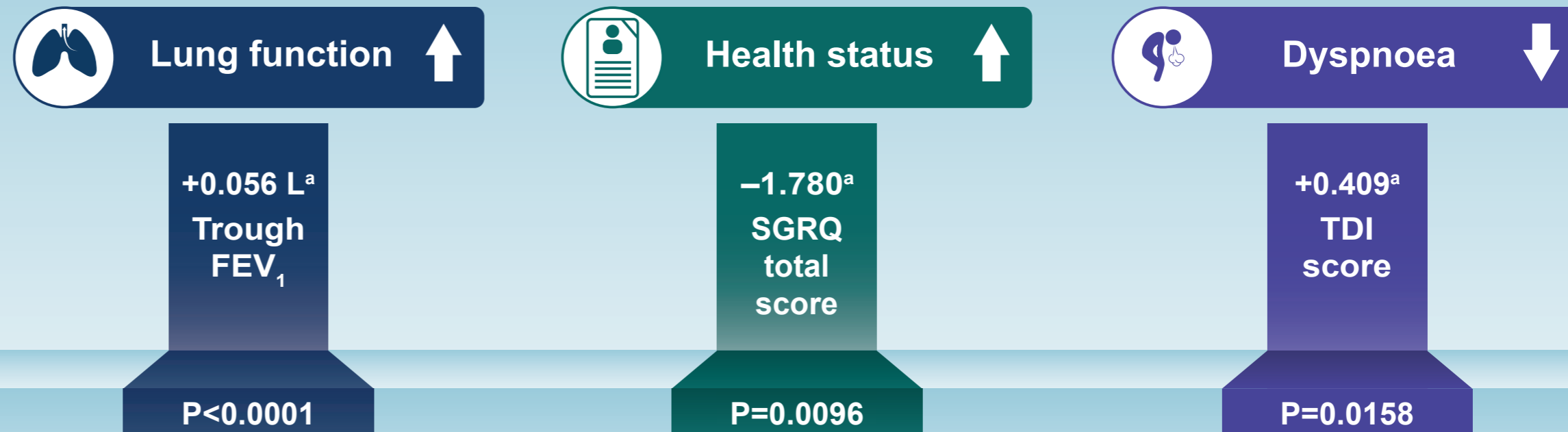
## TONADO® 1+2

Phase III, randomised, double-blind trials in patients with moderate-to-very severe COPD (52 weeks)

## OTEMTO® 1+2

Phase III, randomised, double-blind trials in patients with moderate-to-severe COPD (12 weeks)

Greater improvements with T/O vs tio alone in:



Post hoc analysis of

# 1,078



maintenance-naïve patients  
(not receiving maintenance treatment with LAMAs, LABAs or ICS at study entry)

Patients received T/O 5/5 µg or tio 5 µg

Patients were 60% more likely to experience a clinically important improvement<sup>b</sup> in trough FEV<sub>1</sub>, SGRQ score or TDI score with T/O 5/5 µg compared with tio 5 µg alone (P=0.0036)

<sup>a</sup>Mean difference between T/O 5/5 µg and tio 5 µg after 85 days in maintenance-naïve patients

<sup>b</sup>Clinically important improvement is defined as change from baseline in trough FEV<sub>1</sub> (>0.1L), SGRQ total score (≥4 units) or TDI (≥1 unit) at 12 weeks  
Similar adverse event profiles were noted between the two treatment arms

**Conclusion:** initiation of T/O in maintenance-naïve patients results in superior clinical outcomes compared with tio alone, without compromising patient safety

COPD, chronic obstructive pulmonary disease; FEV<sub>1</sub>, forced expiratory volume in 1 second; ICS, inhaled corticosteroids; LABA, long-acting β<sub>2</sub>-agonist; LAMA, long-acting muscarinic antagonist; SGRQ, St. George's Respiratory Questionnaire; T/O, tiotropium/olodaterol; TDI, Transition Dyspnoea Index; tio, tiotropium

This graphical abstract represents the opinions of the authors. For a full list of declarations, including funding and author disclosure statements, please see the full text online. ©The authors, CC-BY-NC 2020.

PEER-REVIEWED  
INFOGRAPHIC

OPEN  
ACCESS

Adis