COPD Combo Therapy Is Effective, Study Shows

by YVONNE BANKS

Understanding Combination Drug Therapy for COPD

A combination drug therapy may be the best treatment for chronic obstructive pulmonary disease (COPD), a new study has found. The combination of drugs, which aims to open the airways and reduce inflammation simultaneously, was very effective in the Canadian study of almost 12,000 older adults with COPD.

Researchers found patients were less likely to need hospitalization or die because of their breathing condition when a combination of long-acting beta-agonists and inhaled corticosteroids were used. Compared to patients receiving only one of the medications, the patients on the combination of medications fared much better.

Interestingly, the combination drug therapy goes against guidelines for treating COPD. Current guidelines recommend COPD patients take a long-acting beta-agonist, to relax the muscles of the airways and help them widen for extra airflow.

Only if the beta agonist is ineffective on its own is the addition of an inhaled corticosteroid recommended to decrease inflammation in the airways. These guidelines were put in place to avoid the overuse of steroids.

Researchers found that starting on combination therapy to begin with was safe, and did not increase the likelihood of patients developing pneumonia or osteoporosis.

Findings of the Combination Drug Therapy Study

- **According to the study's data on hospitalizations due to COPD, about 30.1 percent of people went into the hospital when taking the single drug.** For patients on combination therapy, 27.8 percent needed hospitalization.
- **Combination therapy was found to reduce the risk of death or hospitalization by 3.7 percent compared to beta-agonists used alone.**
- **If the COPD patient also had asthma, the difference between the single drug therapy and combination drug therapy was even higher.** Combination therapy had a 6.5 percent reduction in risk of death or hospitalization versus taking only one drug.
- **The researchers found combination therapy was not as effective for people who were using medication like Tiotropium, and inhaled long-acting anticholinergic.** This medication works differently in the body than a corticosteroid, inhibiting the transmission of certain impulses of the nerves to facilitate the reversal of airway resistance.
- **There was an 8.4 percent reduction in risk of death or hospitalization for the patients who received combination therapy and had never taken a long-acting anticholinergic medication.**

Talk with your physician about the use of COPD medications in combination, especially if you also have asthma. If you are not taking a long-acting anticholinergic medication, you may be able to use combination drug therapy effectively.

Explain to your doctor or pulmonologist about this study’s results and discuss the effectiveness of using both a beta-agonist and an inhaled corticosteroid. You should be able to make a decision on what is right for you regarding your COPD. By educating yourself, you can be your own advocate when making health decisions.