

EFFECT OF COMBINATION OF TIOTROPIUM/OLODATEROL ON PULMONARY FUNCTION IN PATIENTS WITH COPD IN THE REAL CLINICAL PRACTICE

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Abstract

Aim — to evaluate the effect of combination therapy with tiotropium/olodaterol on pulmonary function in real clinical practice.

Materials and methods. 100 patients with the diagnosis of COPD were included into the study (mean age was $64,09 \pm 1,94$ years, 66 men and 34 women). Smokers — 68 %, mean smoking duration ($24,44 \pm 4,84$) pack-years. Average COPD duration was $9,35 \pm 2,42$ years. All patients underwent spirometry at screening, 4-6 weeks and at 1 year after inclusion. FEV₁, FVC, FEV₁/FVC, FEF₂₅, FEF₅₀, FEF₇₅, PEF, MMEF_{75/85}, FEF_{75/85} were calculated.

Results. There was statistically significant improvement in FEV₁ and FVC values between visits 1 and 3 ($p < 0,05$). At visit 3 there was a statistically significant difference in FEV₁ and FVC values when compared with same values at visit 1 after the inhalation of salbutamol, demonstrating better bronchodilation effect of tiotropium/olodaterol. Absolute increase of FEV₁ between visits 1 and 3 was $221,31 \pm 34,9$ ml; FVC — $411,01 \pm 66,08$ ml. There was statistically significant increase of FEF₇₅, MMEF_{75/25}, FEF_{75/85} between visits 1 and 3 ($p < 0,05$). There was statistically significant increase of FEF₇₅ at visits 2 and 3 in comparison with postBD FEF₇₅ at visit, confirming better bronchodilation effect of tiotropium/olodaterol combination of at the level of small bronchi when compared with salbutamol ($p < 0,05$).

Conclusions. Tiotropium/olodaterol combination showed good effect on pulmonary function in patients with COPD in real clinical settings. This combination demonstrated better bronchodilation than salbutamol, especially at the level of small bronchi.

Key words: COPD, tiotropium/olodaterol, spirometry.

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