

For most patients with chronic obstructive pulmonary disease (COPD), **the increased risk of serious harm including pneumonia and bone fractures with inhaled corticosteroids (ICS)** outweighs the limited benefits on symptoms and exacerbations.<sup>1</sup>

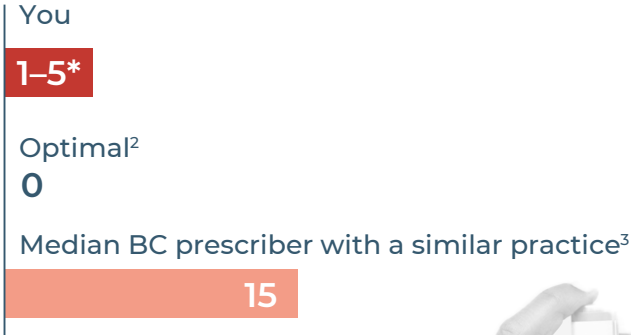
This Portrait shows your prescribing patterns of ICS for COPD. Included are patients age ≥35 with a COPD diagnosis but without an asthma diagnosis.

**Inhaled corticosteroids are not recommended as initial therapy for COPD, alone or in combination with a bronchodilator.<sup>1</sup>**

Number of COPD patients prescribed ICS (monotherapy or combination) as initial therapy, 2020-2021

Number of your COPD patients prescribed any initial therapy, 2020-2021:  
**70**

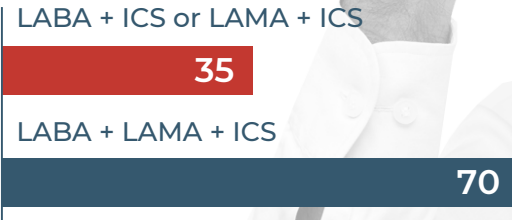
\* Concealed to protect privacy due to small numbers



**Consider adding ICS at the lowest possible dose ONLY for those patients already taking LAMA + LABA who remain symptomatic and continue to experience exacerbations.<sup>1</sup>**

Number of COPD patients you prescribed ICS, by drug combination, 2020-2021

Number of your COPD patients prescribed any COPD medications, 2020-2021:  
**200**



**Table 1: Inhaled medications for COPD in BC**

CLASS	MEDICATION (Brand Name, <i>Inhaler Device</i> )
SABA	salbutamol (Ventolin HFA MDI <sup>RB</sup> , Airomir MDI <sup>RB</sup> , Ventolin Diskus <sup>NB</sup> , generics <sup>RB</sup> ) terbutaline (Bricanyl Turbuhaler <sup>RB</sup> )
SAMA	ipratropium (Atrovent HFA MDI <sup>RB</sup> )
SAMA+SABA	ipratropium + salbutamol (Combivent Respimat <sup>RB</sup> )
LABA	formoterol (Foradil Aerolizer <sup>NB</sup> ) indacaterol (Onbrez Breezhaler <sup>LC</sup> ) salmeterol (Serevent Diskus <sup>LC</sup> , Serevent Diskhaler <sup>LC</sup> )
LAMA	acclidinium (Tudorza Genuair <sup>LC</sup> ) glycopyrronium (Seebri Breezhaler <sup>LC</sup> ) tiotropium (Spiriva HandiHaler <sup>LC</sup> , Spiriva Respimat <sup>RB</sup> ) umeclidinium (Incruse Ellipta <sup>RB</sup> )
LAMA+LABA	acclidinium + formoterol (Duaklir Genuair <sup>LC</sup> ) glycopyrronium + indacaterol (Ultibro Breezhaler <sup>LC</sup> ) tiotropium + olodaterol (Inspiroto Respimat <sup>LC</sup> ) umeclidinium + vilanterol (Anoro Ellipta <sup>LC</sup> )
ICS+LABA	budesonide + formoterol (Symbicort Turbuhaler <sup>NB</sup> ) fluticasone furoate + vilanterol (Breo Ellipta <sup>LC</sup> ) fluticasone propionate + salmeterol (Advair Diskus <sup>LC</sup> , generics DPI <sup>LC</sup> )
ICS+LAMA+LABA	budesonide + glycopyrronium + formoterol (Breztri Aerosphere <sup>NB</sup> ) fluticasone furoate + umeclidinium + vilanterol (Trelegy Ellipta <sup>LC</sup> )

**SABA** short acting beta<sub>2</sub> adrenergic agonist; **SAMA** short acting muscarinic antagonist; **LABA** long acting beta<sub>2</sub> adrenergic agonist  
**LAMA** long acting muscarinic antagonist; **ICS** inhaled corticosteroid; **RB** regular benefit; **LC** limited coverage; **NB** non-benefit

*Adapted with permission from: BC Provincial Academic Detailing Service. COPD Update: Focus on Intensifying LABA, LAMA and ICS Therapy (Updated 2022-07-27). [www2.gov.bc.ca/assets/gov/health/practitioner-pro/provincial-academic-detailing-service/copd\\_update.pdf](http://www2.gov.bc.ca/assets/gov/health/practitioner-pro/provincial-academic-detailing-service/copd_update.pdf)*

## REFERENCES & NOTES

- <sup>1</sup> Therapeutics Initiative. *Minimizing inhaled corticosteroids for COPD*. Therapeutics Letter. 2023 (October); 145:1-2.
- <sup>2</sup> Based on the best available evidence, no COPD patient should receive ICS as initial therapy. See Therapeutics Letter, *Minimizing inhaled corticosteroids for COPD*, for more detail.
- <sup>3</sup> Based on median prescribing patterns of BC primary care practitioners and the number of new users of COPD medications in your practice.

Inaccuracy in your personal prescribing Portrait may arise from incomplete patient visit data or imprecise diagnosis coding.

## DATA & DEFINITIONS

**Patients included:** Patients ≥ age 35 with a diagnosis of COPD and a prescription of a COPD medication linked to your MSP billing number. COPD was defined as 1) ≥ 2 MSP records with ICD-9 codes 491, 492, or 496 or Complex Care codes; or 2) hospital/emergency room (ED) discharges with ICD-10 codes J41, J43, or J44.

**Patients excluded:** Patients with a previous diagnosis of asthma and patients who were discharged from hospital or ED (with any diagnosis) in the 14 days prior to the prescription. Asthma was defined as 1) ≥ 2 MSP records with ICD-9 code 493 or Complex Care codes; or 2) hospital/ED room discharges with ICD-10 code J45.

**Initial Treatment:** Defined as the first prescription of a SABA, SAMA, LABA, LAMA, or ICS medication for COPD after at least 365 days without a COPD medication. It also includes any additional COPD medication prescribed in the following 6 days.

**FOR DETAILED DEFINITIONS AND REFERENCES SEE: [WWW.TI.UBC.CA/PORTRAIT-ICS](http://WWW.TI.UBC.CA/PORTRAIT-ICS)**