Sustained Asthma Control Over Three Years with Beclometasone/Formoterol/Glycopyrronium: Results from the TriMaximize Study

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BACKGROUND:

- Randomized clinical trials have shown clinical efficacy of extrafine formulation single-inhaler triple therapy consisting of beclometasone dipropionate/formoterol fumarate/glycopyrronium (BDP/FF/G)[1].
- TriMaximize study observes asthma patients who have switched to BDP/FF/G in a real-world setting over a period of one to three years[2].

METHODS:

- TriMaximize is a multinational, observational study that follows patients with asthma up to 36 months after prescription of BDP/FF/G. Patients were recruited at 162 sites across eight countries (Germany, United Kingdom, Austria, Denmark, France, Spain, Poland and Italy). Study-typical attrition resulted in a visit-dependent decline in patient numbers (baseline n=1445; 3 months n=919; 12 months n=800; 24 months n=281; 36 months n=63), due to routine drop-outs and missing follow-up data.
- Asthma control was assessed using the Asthma Control Test (ACT). The minimal clinically important difference (MCID) for the ACT is 3 points. ACT score categories were defined as uncontrolled (ACT ≤15), partly controlled (ACT 16–19), and controlled (ACT ≥20).
- Only patients with available ACT data are included in this analysis. Patient transitions were visualized using a Sankey diagram generated in SAS software.

Table 1. Baseline characteristics.

Parameters		Overall population n= 1445
Age (years), mean (±SD)		57.6 (15.0)
Sex, n (%)	Female	907 (62.8)
	Male	538 (37.2)
BMI (kg/m^2), mean (±SD)		28.9 (6.4)
Smoking status, n (%)	Never smoker	755 (52.2)
	Current smoker	259 (17.9)
	Former smoker	431 (29.8)
Time since stopped smoking (years)* (±SD)		14.7 (12.4)
Time since diagnosis at baseline visit, years (±SD)		15.1 (14.7)
Concomitant diseases, n (%)		1161 (85.3)
	Arterial hypertension	507 (37.8)
	COPD	298 (22.4)
Rate of moderate or severe asthma exacerbations in previous year, mean (±SD)		1.8 (1.6)
GINA classification, n (%)	GINA Step 4	1079 (76.3)
	GINA Step 5	335 (23.7)
Prior treatment	ICS/LABA**	1050 (72.7)
	ICS/LABA/LAMA**	395 (27.3)

*restricted to former smokers
**fixed or free

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RESULTS:

Figure 1. Mean ACT score and the mean ACT change (±SD) from baseline and after 3, 12, 24, and 36 months (mths) of treatment with BDP/FF/G.

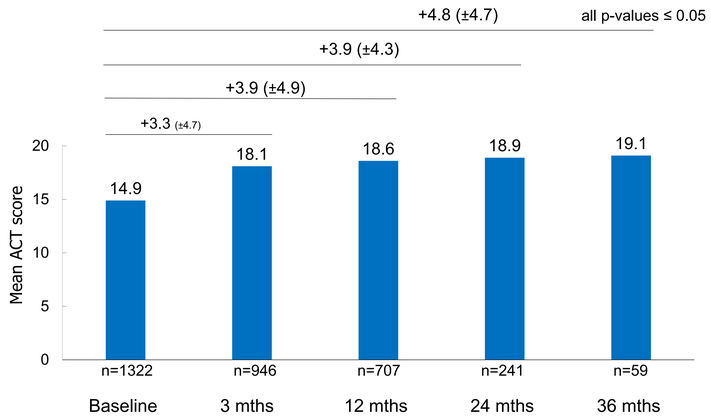


Figure 2. ACT Responders - percentage of the patients who achieved the MCID of 3 points for the ACT score after 3,12, 24 and 36 months (mths).

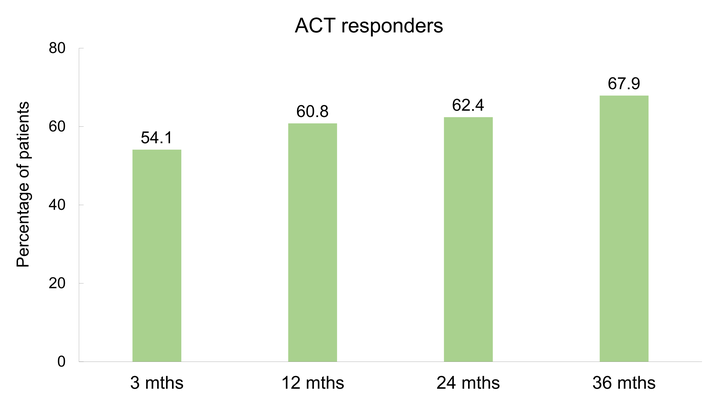


Figure 3. Change of ACT score categories at baseline and after 3,12, 24 and 36 months (mths) of treatment with BDP/FF/G.

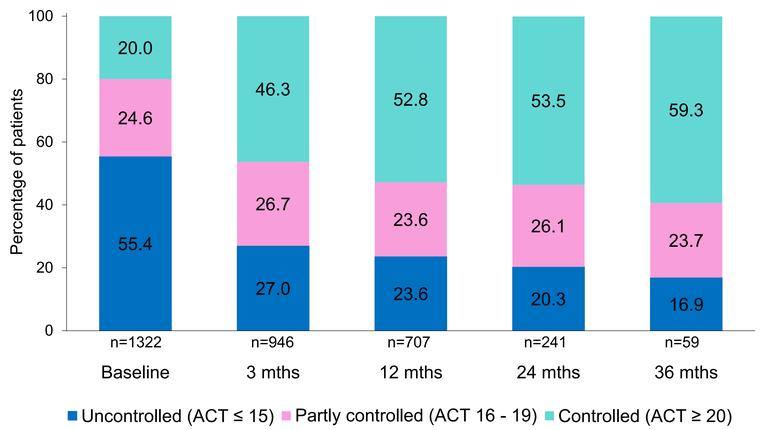
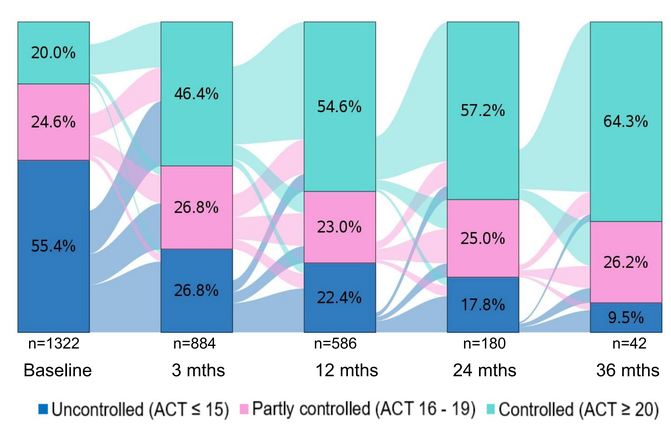


Figure 4. Sankey diagram showing patients transitions across ACT categories at baseline and after 3,12, 24 and 36 months (mths) of treatment with BDP/FF/G.



References:

[1]Virchow J.C. et al., Single inhaler extrafine triple therapy in uncontrolled asthma (TRIMARAN and TRIGGER): two double-blind, parallel-group, randomised, controlled phase 3 trials. The Lancet, 2019. 394(10210): p. 1737-1749.

[2]Gessner C, et al. Real-World Effectiveness and Safety of Single Inhaler Triple Therapy with Beclometasone/ Formoterol/ Glycopyrronium in Moderate to Severe Asthma: TriMaximize Study. J Asthma Allergy. 2026. doi:10.2147/JAA.S582286

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CONCLUSIONS:

Asthma control significantly improved after initiation of BDP/FF/G treatment and then remained stable throughout the 3-year follow-up. This indicates that BDP/FF/G therapy is a valuable option for the long-term treatment of asthma patients.