

# Abstract Presentations

## 6. Kenneth Chapman, Canada

# Indacaterol/Mometasone Furoate Fixed-dose Combination vs Salmeterol/Fluticasone in Uncontrolled Asthma: Results of PALLADIUM and IRIDIUM Studies

**Presented by:**

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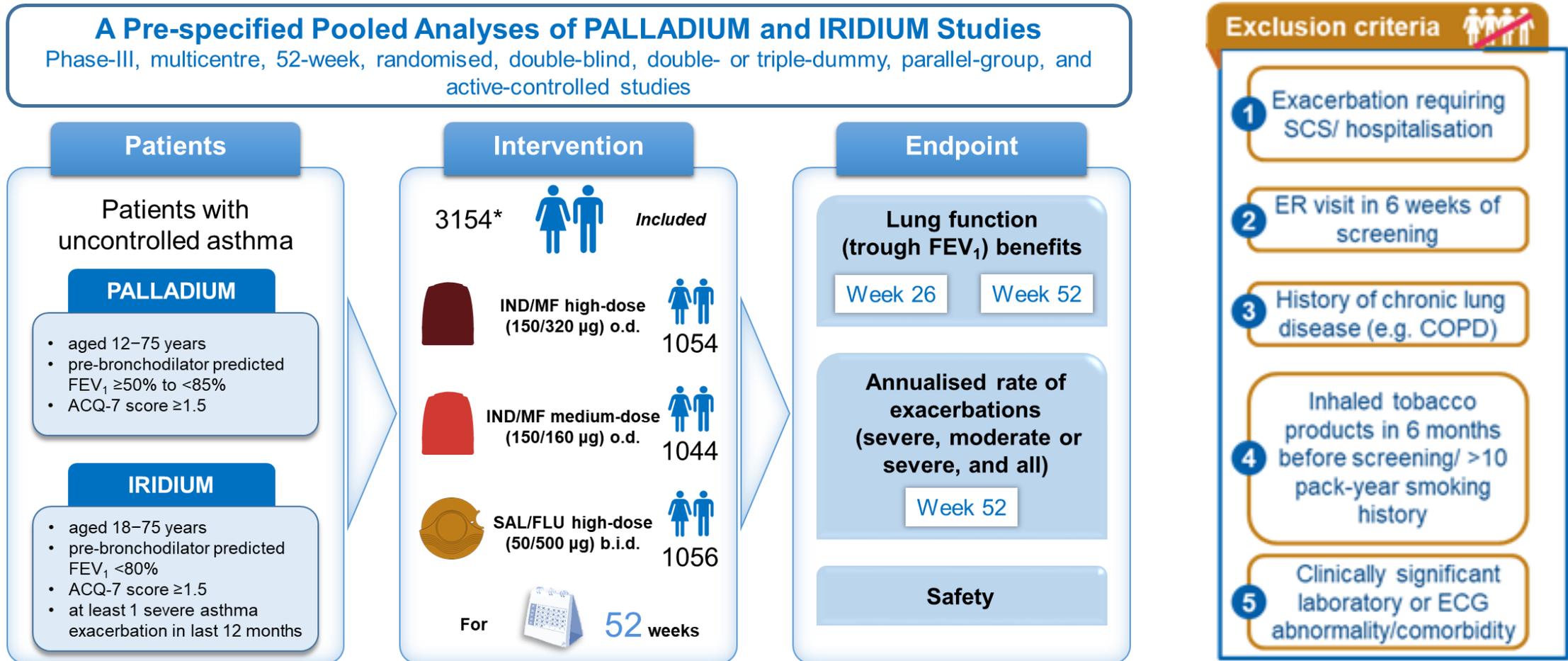
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# Introduction

- Once-daily LABA/ICS dosing improves adherence and persistence compared with twice-daily dosing in patients with asthma<sup>1,2</sup>
- Two Phase III studies (PALLADIUM and IRIDIUM) compared the efficacy and safety of once-daily IND/MF high- (150/320 µg) and medium-dose (150/160 µg) to twice-daily SAL/FLU high-dose (50/500 µg) in patients with uncontrolled asthma<sup>3,4</sup>
- The following is a pre-specified pooled analysis of PALLADIUM and IRIDIUM studies comparing once-daily IND/MF via Breezhaler<sup>®</sup> to twice-daily SAL/FLU via Diskus<sup>®</sup>

# Methods

## Study design (Pre-specified pooled analyses of PALLDIUM and IRIDIUM)



ACQ, Asthma Control Questionnaire; b.i.d., twice daily; COPD, chronic obstructive pulmonary disease; ECG, electrocardiogram; ER, emergency room; FEV<sub>1</sub>, forced expiratory volume in 1 second; IND/MF, indacaterol/mometasone furoate; o.d., once daily; SAL/FLU, salmeterol/fluticasone; SCS, systemic corticosteroids  
 PALLADIUM study. Available from :<https://clinicaltrials.gov/ct2/show/NCT02554786>; IRIDIUM study. Available from : <https://clinicaltrials.gov/ct2/show/NCT02571777>

# Results - Baseline demographics and clinical characteristics

	IND/MF high-dose o.d. (N = 1054) PALLADIUM (n = 443) IRIDIUM (n = 611)	IND/MF medium-dose o.d. (N = 1044) PALLADIUM (n = 437) IRIDIUM (n = 607)	SAL/FLU high-dose b.i.d. (N = 1056) PALLADIUM (n = 444) IRIDIUM (n = 612)
Age, years	49.9 (13.74)	50.0 (13.85)	51.2 (13.39)
Duration of asthma, years	15.9 (13.87)	16.6 (14.61)	16.8 (14.56)
≥1 asthma exacerbations in previous year, n (%)	748 (71.0)	736 (70.5)	756 (71.6)
Prior asthma medication (LABA/ICS); n (%)	930 (88.2)	893 (85.5)	904 (85.6)
Baseline ACQ-7 score	2.44 (0.556)	2.44 (0.516)	2.41 (0.527)
Pre-bronchodilator FEV <sub>1</sub> (% predicted) prior to run-in period	59 (12.98)	59.4 (12.97)	59.6 (12.72)

Data are presented as mean (SD) unless otherwise stated

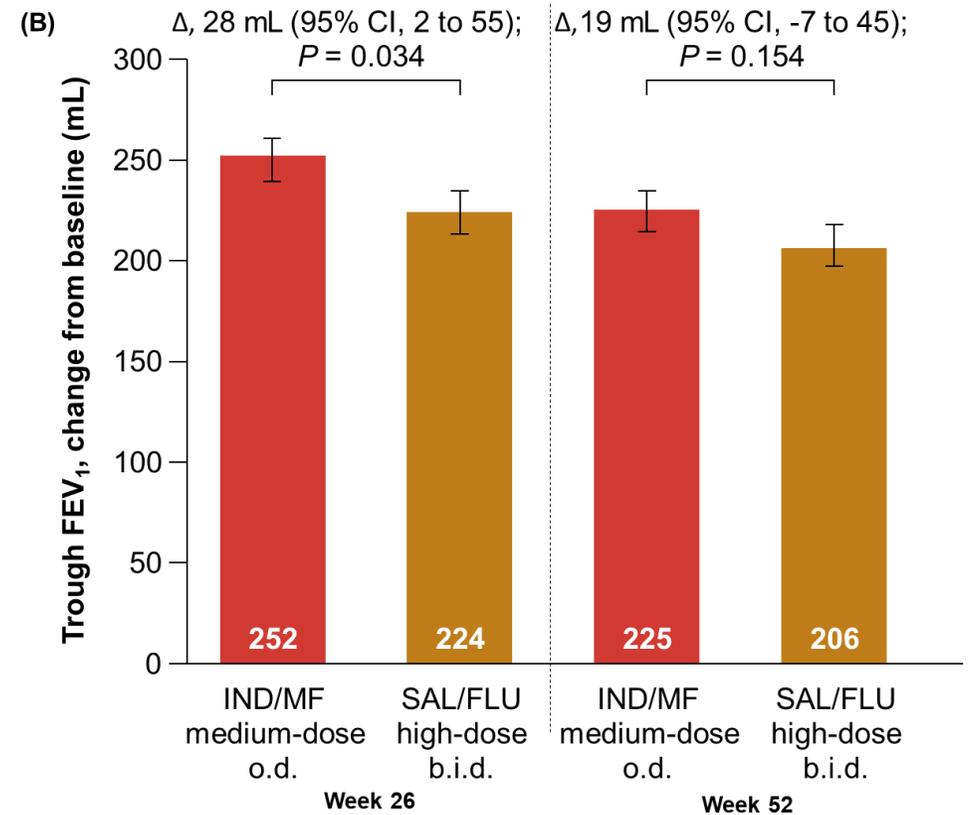
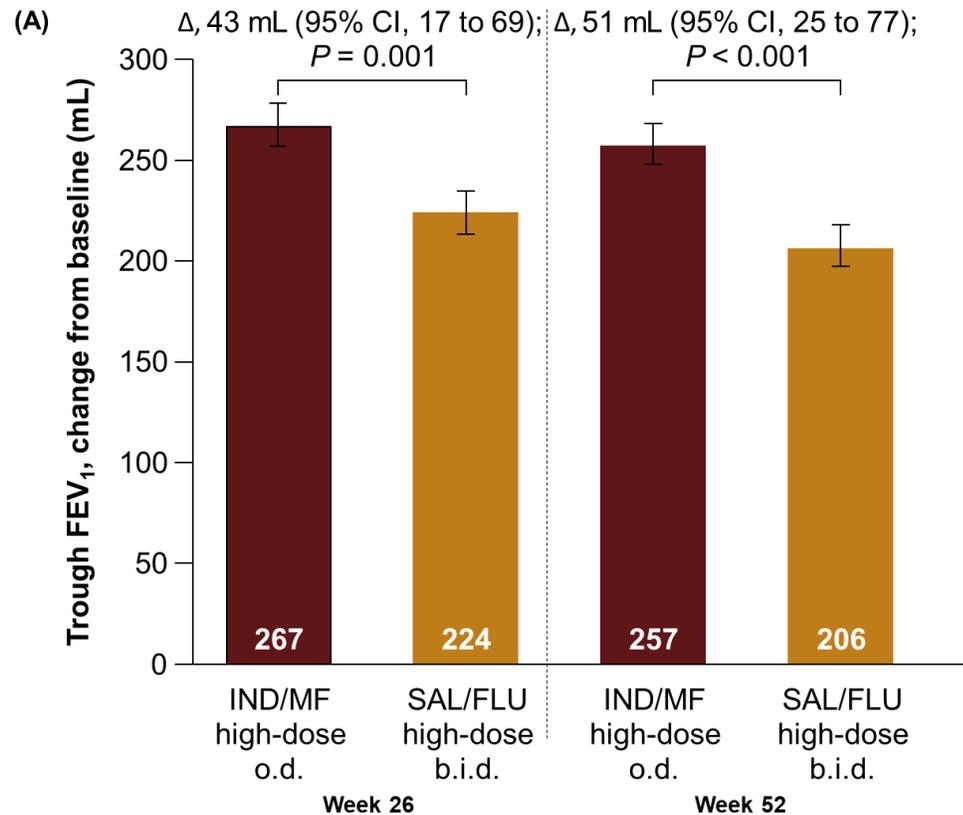
IND/MF high-dose, IND/MF 150/320 µg; IND/MF medium-dose, IND/MF 150/160 µg; SAL/FLU high-dose, SAL/FLU 50/500 µg

ACQ, Asthma Control Questionnaire; b.i.d., twice daily; FEV<sub>1</sub>, forced expiratory volume in 1 second; IND/MF, indacaterol/mometasone furoate; o.d., once daily; SAL/FLU, salmeterol/fluticasone  
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# Results - Lung function

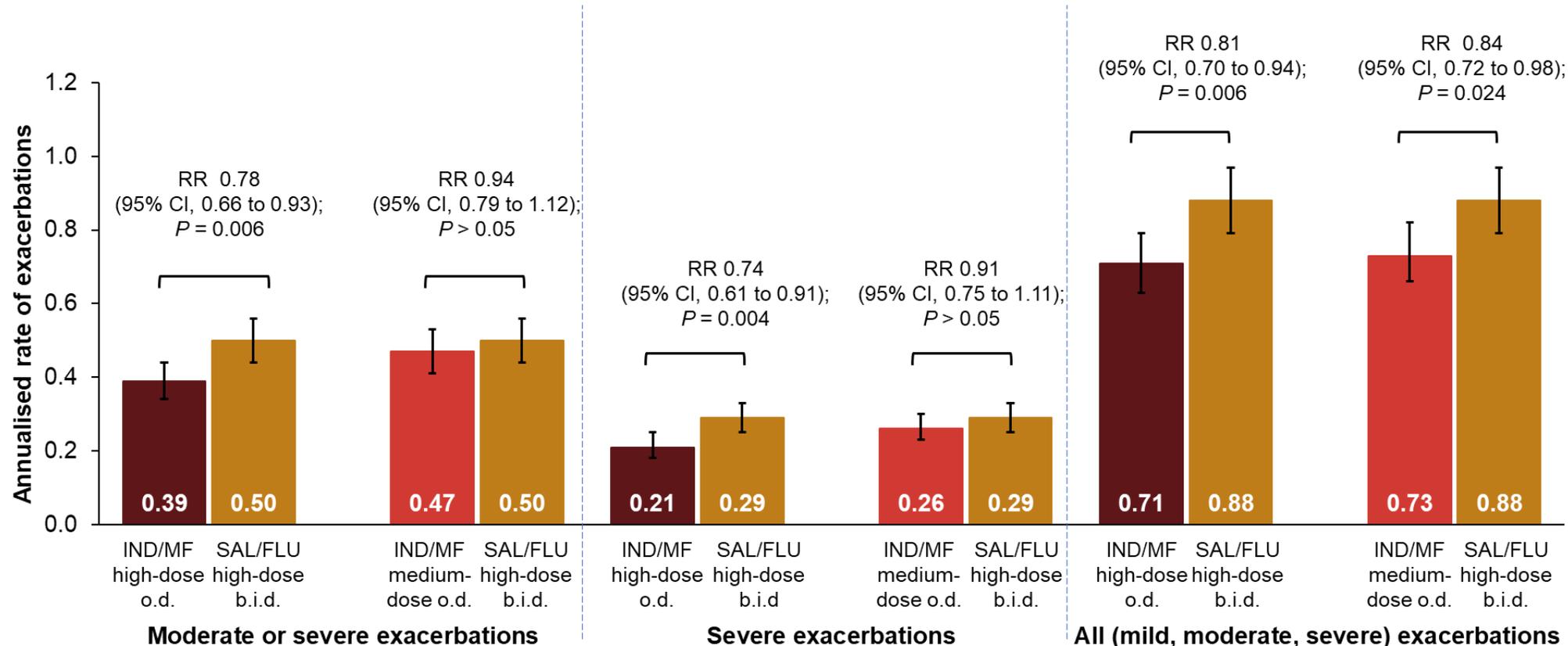
**IND/MF high-dose o.d. significantly improved trough FEV<sub>1</sub> compared with SAL/FLU high-dose b.i.d. at Week 26 and 52**

**IND/MF medium-dose o.d. was comparable with SAL/FLU high-dose b.i.d. in improving trough FEV<sub>1</sub> at Week 26 and 52**



# Results- Exacerbation reduction

- Exacerbation rate was significantly lower with IND/MF high-dose once-daily than with SAL/FLU high-dose twice-daily
- Varying with exacerbation subcategory, exacerbation rate was numerically or significantly lower for IND/MF medium-dose once-daily as compared with SAL/FLU high-dose twice-daily



# Conclusions

- High-dose IND/MF inhaled once-daily improves lung function and reduces exacerbation rate more effectively than SAL/FLU high-dose inhaled twice-daily
- Medium-dose IND/MF inhaled once-daily improves lung function and reduces exacerbation rate comparably to SAL/FLU high-dose inhaled twice-daily at a reduced steroid burden
- All treatments were well tolerated