## **DYNAGITO®**

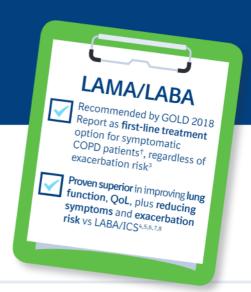
# One of the Largest Studies to Date of Exacerbations in COPD



**Better protecting** people with COPD from exacerbations or 'flare-ups' is critical as they accelerate COPD progression and have a damaging effect on people's lives1



DYNAGITO® investigated the effect of Spiolto® Respimat® (LAMA/LABA)\* in reducing the rate of moderate-to-severe COPD exacerbations compared with Spiriva® Respimat® (LAMA)2



5 facts on **DYNAGITO®** 



patients



Investigated Tiotropium/ olodaterol vs Tiotropium



conducted over 52 weeks



Primary endpoint: Annualised rate of moderate-to-severe exacerbations



countries

### DYNAGITO® Key Findings®



Lower rate of moderate-to-severe COPD exacerbation (p=0.0498<sup>‡</sup>)<sup>9</sup> Targeted significance level of p<0.01 was not met for the primary endpoint



Key secondary endpoint: Time to first moderate-to-severe **COPD** exacerbation

No significant difference in the time to first moderate-to-severe COPD exacerbation between Spiolto® Respimat® and Spiriva® Respimat®  $(p=0.1188 \pm)$ 

#### Further endpoints:

Fewer exacerbations that required intervention with systemic steroids or with systemic steroids plus antibiotics9



20% lower **1** 

where the use of systemic steroids was needed  $(p=0.0068^{+})^{9}$ 



9% lower 🍜

where the use of systemic steroids plus antibiotics was needed (p =  $0.0447^{\ddagger}$ )9

There was no difference in exacerbation rate between Spiolto® Respimat® and Spiriva<sup>o</sup> Respimat<sup>o</sup> in exacerbations treated with antibiotics only (p=0.2062‡)9



#### Safety data

No new side effects or safety concerns identified in DYNAGITO®9 Spiolto® Respimat® has a similar safety profile to Spiriva® Respimat®9

### TOviTO®

DYNAGITO° adds to existing data from large-scale TOviTO® Phase III clinical trial programme investigating the efficacy and safety of Spiolto® Respimat® in COPD



Spiolto® Respimat® consistently offers improvements beyond Spiriva® Respimat® in symptom reduction, exacerbation risk reduction, and quality of life for people with COPD9,10,11

<sup>\*</sup> LAMA (long-acting antimuscarinio antagonist) and LABA (long-acting beta2-agonist) are both long-acting bronchodilators that work by opening airways and helping to keep them open
† GROUP B patients with severe breathlessness and all Group D patients should be started on LAMA/LABA; Group B patients without severe breathlessness should be started on a LAMA or a LABA

\*The primary endpoint was not met



