## **European Respiratory Society Annual Congress 2012**

**Abstract Number: 2951** 

**Publication Number: P2194** 

Abstract Group: 5.1. Airway Pharmacology and Treatment

Keyword 1: COPD - management Keyword 2: Bronchodilators Keyword 3: Airway management

**Title:** The GOLDEN-1 study: Safety and bronchodilatory effects of nebulized glycopyrrolate (EP-101) using high efficiency nebulizer in patients with COPD

Charles 21705 Fogarty cfogarty@medresearch.com MD <sup>1</sup>, Edwin 21706 Kerwin ekerwin@criresearch.com MD <sup>2</sup>, Karen 21707 Dunn karend@nccr.com MD <sup>3</sup>, David 21708 Singh dsingh@meu.org.uk MD <sup>4</sup> and Ahmet 21709 Tutuncu atutuncu@elevationpharma.com MD <sup>5</sup>. <sup>1</sup> Clinical Research, Spartanburg Medical Research, Spartanburg, SC, United States; <sup>2</sup> Clinical Research, Clinical Research Institute of Southern Oregon, Medford, OR, United States; <sup>3</sup> Clinical Research, North Carolina Clinical Research, Raleigh, NC, United States; <sup>4</sup> Clinical Research, Medicines Evaluation Unit, Manchester, United Kingdom and <sup>5</sup> Clinical Research, Elevation Pharmaceuticals Inc., San Diego, CA, United States.

**Body:** Introduction: EP-101 is a long-acting muscarinic antagonist bronchodilator for nebulization using a high efficiency nebulizer for the treatment of COPD. The safety and efficacy of once daily nebulized EP-101 was assessed in this Phase 2b study after 7 days of dosing in patients with COPD. Methods: This was a multicenter, randomized, double-blind, placebo-controlled, 4-period cross-over, incomplete block design study. A total of 140 patients with moderate-to-severe COPD were randomized to receive 4 of 7 treatments: EP-101 (placebo, 25, 50, 100, and 200 μg) once daily via high efficiency nebulizer, open-label tiotropium 18 μg once daily, and open-label ipratropium 500 μg three times daily via jet nebulizer. There was a 7-day washout period between treatments. Results: All doses of EP-101 were well tolerated with similar AE rates between placebo and EP-101 (31.2%, 29.7%, 26.9%, 35.5% and 30.7% for placebo, 25, 50, 100 and 200 μg, respectively). There was no apparent dose-response relationship for incidence and severity of AEs. Mean changes in vital signs and ECG parameters from baseline on Day 7 were comparable between the treatment groups. All doses of EP-101 demonstrated dose-related and significant improvements in FEV, AUC (0-24hr) on Day 7 compared with placebo, with estimated differences between EP-101 doses and placebo ranging between 110-169 mL. Conclusion: Once daily dosing with nebulized EP-101 was well tolerated over a 7-day treatment period and provided rapid onset of bronchodilation with clinically meaningful and sustained improvement in lung function over 24 hours in patients with COPD. Funded by Elevation Pharmaceuticals Inc.