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Title: Dual bronchodilation with once-daily QVA149 reduces exacerbations, improves lung function and health status versus glycopyrronium and tiotropium in severe-to-very severe COPD patients: The SPARK study

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Body: Introduction Patients (pts) with severe-to-very severe COPD require intensified therapy to reduce risk of exacerbations. Such patients may benefit from additional bronchodilation. Once-daily QVA149 is a dual bronchodilator consisting of a fixed-dose combination of two long-acting bronchodilators, indacaterol and glycopyrronium (GLY). Methods The 64wk SPARK study randomized pts to QVA149 110/50µg or GLY 50µg, both via the Breezhaler® device; or open-label tiotropium (TIO, 18µg via the Handihaler® device). Objectives were rate of COPD exacerbations, lung function, health status, and safety. Results 2224 pts were randomized, 63.3% completed. The figure shows rate reduction (RR) in COPD exacerbations. QVA149 had clinically meaningful and statistically significant improvement in pre- and post-dose FEV1 vs. GLY and TIO for all visits (all p<0.001); there were significant improvements in SGRQ score at Wk64 vs. GLY (p<0.01) and TIO (p<0.001). Frequency of adverse and cardio/cerebrovascular (CCV) events was similar across treatment groups.

Conclusion Superior improvements in lung function with QVA149 leads to fewer exacerbations and improved health status vs. GLY and TIO in patients with severe-to-very severe COPD. QVA149 was safe and well tolerated.