

# PACEF Lincolnshire Primary Care – Quick Guide to selecting inhalers for COPD patients



	Low Inspiratory Flow <30 L/min		High Inspiratory Flow >30 L/min		
	pMDI and spacer is the device of choice for patients who have low inspiratory <u>time</u>		First line choice	Second line choice	Third line choice
	First line choice	Second line choice	First line choice	Second line choice	Third line choice
<b>SABA</b>	Salbutamol pMDI +/- spacer	Salamol Easi-Breathe	Salbutamol Easyhaler		
<b>SAMA</b>	Ipratropium pMDI +/- spacer				
<b>LABA</b>	Atimos pMDI (Formoterol) +/- spacer	Salmeterol pMDI +/- spacer	Formoterol Easyhaler	Serevent Accuhaler (Salmeterol)	
<b>LAMA</b> (LAMA inhalers can cause a dry mouth)	Spiriva Respimat (Tiotropium)		Braltus Zonda (Tiotropium)	Seebri Breezhaler (Glycopyrronium) Elklira Genuair (Acclidinium) Spiriva Handihaler (Tiotropium)	Incruse Ellipta (Umeclidinium)
<b>LABA/LAMA</b>	Spiolto Respimat (Olodaterol/Tiotropium)		Ultibro Breezhaler (Indacaterol/ Glycopyrronium)	Duaklir Genuair (Formoterol/Aclidinium)	Anoro Ellipta (Vilanterol/Umeclidinium)
<b>ICS/LABA</b> (ICS inhalers can cause oral thrush – instruct to rinse out mouth after use)	Fostair pMDI (Beclometasone/Formoterol) +/- spacer		Duoresp Spiromax (Budesonide/Formoterol)  Symbicort Turbohaler (Budesonide/Formoterol)	Fostair NEXThaler (Beclometasone/Formoterol)	Relvar Ellipta (Fluticasone Furoate*/Vilanterol) Seretide Accuhaler (Fluticasone Propionate/ Salmeterol) Airflusal Forspiro (Fluticasone Propionate/Salmeterol)
<b>LABA/LAMA/ ICS</b>	Trimbow pMDI (Formoterol/Glycopyrronium/ Beclomethasone)  +/- spacer		Trimbow pMDI (Formoterol/Glycopyrronium/ Beclomethasone)  + spacer		Trelegy Ellipta (Vilanterol/Umeclidinium/Fluticasone Furoate*)  Only to be used if Trimbow pMDI ± spacer is unsuitable for the patient

\*Caution higher potency steroid. Using FF has a higher prevalence of oral candidiasis, hoarse voice, skin bruising and pneumonia - has been confirmed in ICS studies using FF even at low doses (GOLD 2019).

Other inhaler devices approved for COPD are detailed on the Lincolnshire formulary website available via: <http://www.lincolnshirejointformulary.nhs.uk/>

For **asthma/COPD overlap syndrome** follow the asthma pathway

For advice on when to initiate treatment please refer to the following stepwise approach: <https://www.nice.org.uk/guidance/ng115/resources/visual-summary-treatment-algorithm-pdf-6604261741>