

THE ROLE OF NOVEL MUSCARINIC ANTAGONIST SEEBRI BREEZHALER IN TREATMENT OF COPD PATIENTS

Abstract

Novel long-acting muscarinic antagonist glycopyrronium bromide — Seebri Breezhaler, 50 mcg per actuation, 1 inhalation once daily, is registered and approved for medical use in Ukraine. It is indicated for maintenance therapy and relief of symptoms in COPD patients. A literature data analysis demonstrates that Seebri Breezhaler with rapid onset of bronchodilator effect, which lasts 24 hours, is effective and safe bronchodilator.

The use of Seebri Breezhaler in real clinical practice will determine its place in management of COPD patients. As confirmed by clinical trials data glycopyrronium is indicated as monotherapy or in combination with other compounds in COPD patients, beginning from stage 2. It is obvious that if the patient and the physician are satisfied by the grade of control of lung function and rate of exacerbations, any changes in therapy, caused by clinical or economic reasons, would not be justified. Hence, newly diagnosed COPD patients, or the patients who for any reason do not receive any therapy, or those ineffectively treated before, are considered candidates for Seebri 50 mcg once daily therapy. A therapy with Seebri is well grounded in patients with morning symptoms, since the fast onset of bronchodilative effect would significantly improve the quality of life of these patients. A combined use of glycopyrronium with indacaterol or any other long-acting beta agonist (LABA) seems very promising. This combination can potentially postpone the need in inhaled corticosteroids (ICS), which do not always allow to achieve control in COPD course.

The possibility of substitution of LABA with ICS by glycopyrronium (alone or with indacaterol or any other LABA) in management of patients with COPD is a subject of further research. This rationale gives hope that implementation of novel 24-hour novel muscarinic antagonist in GOLD groups B–D COPD patients (2–4 stages) would improve the quality of life and prognosis in current patients.

Key words: chronic obstructive pulmonary disease, long-acting muscarinic antagonist glycopyrronium bromide, safety, efficacy.

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