



TRIXEO
AEROSPHERE®

(formoterol fumarate, glycopyrronium,
and budesonide) Inhalation suspension

הטיפול ב-COPD בידיים שלך!

משאף הטריפל טריקסאו

מפחית תמותה[‡],
ללא תלות בכוח
שאיפה¹⁻⁵



שתי שאיפות. פעמיים ביום.
טיפול יום וגם לילה במשאף אחד.
ניתן לרישום על ידי כל רופא
מומחה. כלול בסל הבריאות



AstraZeneca

[‡]49% reduction versus LAMA/LABA (HR 0.51, 95% CI 0.33, 0.80), unadjusted P=0.00351* (ARR 1.24%).

The P-value is unadjusted owing to an endpoint in the Type I error control testing hierarchy not reaching significance^{1,3}

*Additional data included from 354 patients who had incomplete 1-year vital status at the time of trial completion

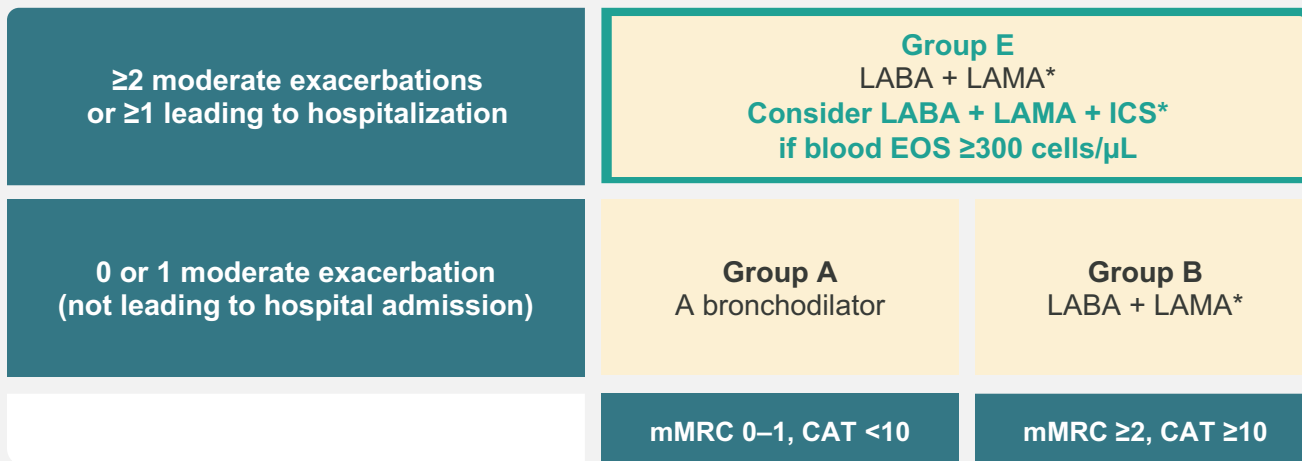
LABA, long-acting beta2-agonist; LAMA, long-acting muscarinic antagonist ARR, absolute risk reduction. HR, hazard ratio LAMA/LABA, glycopyrronium / formoterol fumarate dihydrate.

Ref: 1.Martinez FJ, et al. Am J Respir Crit Care Med 2021;203:553–564; 2.Rabe KF, et al. N Engl J Med 2020;383:35–48; 3.Rabe KF, et al. Respir Med 2019;158:59–66 4.TRIXEO latest approved Prescribing Information by MoH. 5. Figure 3.11 GOLD. Global strategy for prevention, diagnosis and management of COPD. 2025. Available from: <https://goldcopd.org/2025-gold-report/> (Accessed 23 November 2024)



טיפול במשאף משולש (ICS-LABA-LAMA) נחשב על פי הקווים המנחים של ה-GOLD כטיפול התחלתי לחולים שנמצאים בקבוצה E עם רמת אאוזינופילים $\leq 300 \text{ cells}/\mu\text{L}$ [†]

Initial pharmacological treatment



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[†] Trixeo is not indicated for the initial treatment of COPD.

Indication: Trixeo Aerosphere is indicated as a maintenance treatment in adult patients with moderate to severe chronic obstructive pulmonary disease (COPD) who are not adequately treated by a combination of an inhaled corticosteroid and a long-acting beta2-agonist or combination of a long-acting beta2-agonist and a long-acting muscarinic antagonist

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*Single-inhaler therapy may be more convenient and more effective than multiple inhalers. Single inhaler improves adherence to treatment. Exacerbation refers to the number of exacerbation per year CAT, COPD Assessment Test; EOS, eosinophils; GOLD, Global Initiative for Chronic Obstructive Lung Disease; mMRC, modified Medical Research Council

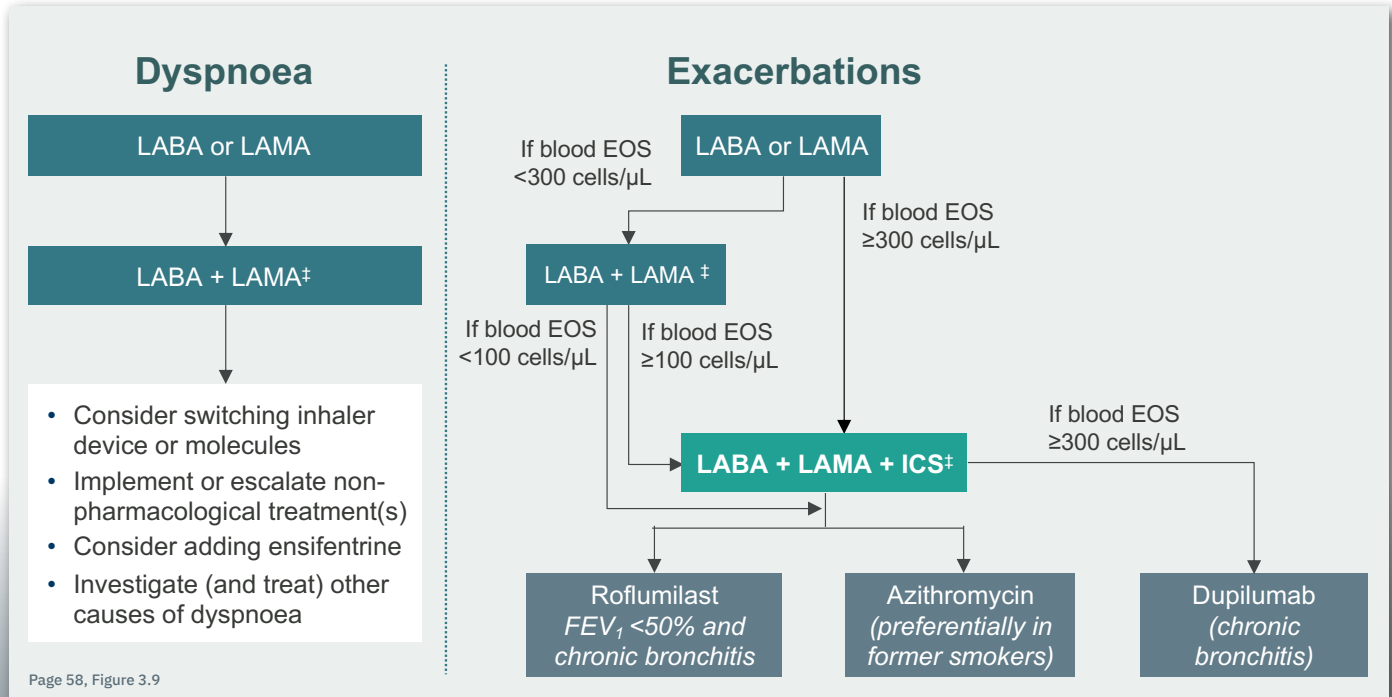
Ref: Global Initiative for Chronic Obstructive Lung Disease (GOLD). Global strategy for prevention, diagnosis and management of COPD. 2025. Available from: <https://goldcopd.org/2025-gold-report/> (Accessed 25 November 2024)

TRIXEO latest approved Prescribing Information by MoH.



טיפול במשאף משולש (ICS-LABA-LAMA) מומלץ על פי הקווים המנחים של ה-GOLD כטיפול המשך לחולים שעברו התלקחות לאחר טיפול יחיד[§] במרחיב סמפונות LABA או LAMA או טיפול משולב LABA+LAMA[†]

Follow-up pharmacological treatment[‡]



Page 58, Figure 3.9

[§] Trixeo is not indicated for the initial treatment of COPD or patients treated with monotherapy of either LABA, LAMA or ICS

Indication: Trixeo Aerosphere is indicated as a maintenance treatment in adult patients with moderate to severe chronic obstructive pulmonary disease (COPD) who are not adequately treated by a combination of an inhaled corticosteroid and a long-acting beta₂-agonist or combination of a long-acting beta₂-agonist and a long-acting muscarinic antagonist.

© 2025 Global Strategy for Diagnosis, Management and Prevention of COPD all rights reserved. Use is by express license from the owner. Extracted from Figure 3.9, depicting treatment pathways. Information related to use of pathways is not included. Further information on use of pathways can be found in the complete figure in the reference

*Except if EOS < 300 cells/μL; †except if EOS < 100 cells/μL; ‡single-inhaler therapy may be more convenient and effective than multiple inhalers; single inhalers improve adherence to treatment.

Exacerbation refers to the number of exacerbation per year. consider de-escalation of ICS if pneumonia or other considerable side effects; in case of blood EOS ≥ 300 cells/μL, de-escalation is more likely to be associated with the development of exacerbations.

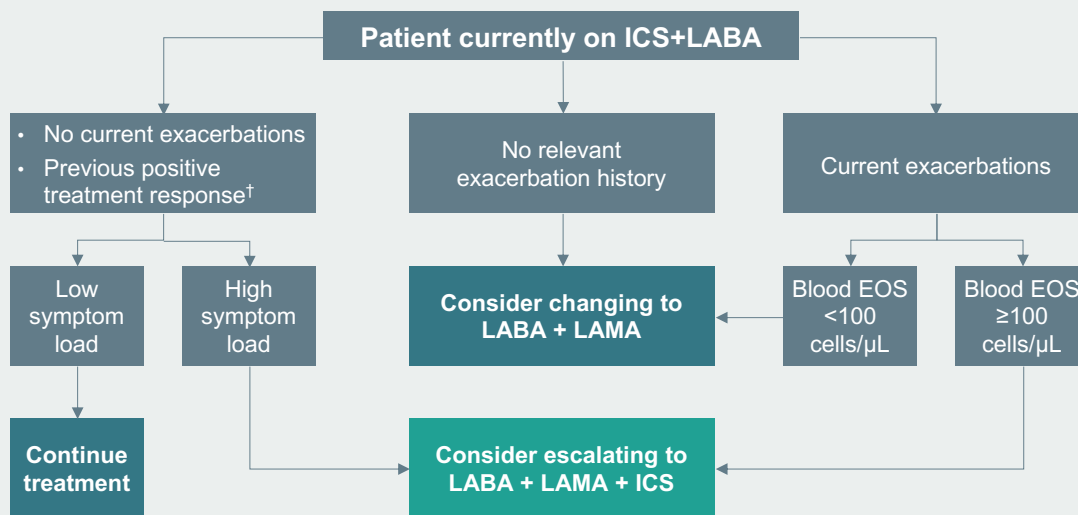
EOS, eosinophils; FEV₁, forced expiratory volume in 1 second; GOLD, Global Initiative for Chronic Obstructive Lung Disease; ICS, inhaled corticosteroid(s); LABA, long-acting beta₂-agonist; LAMA, long-acting muscarinic antagonist

Ref: Global Initiative for Chronic Obstructive Lung Disease (GOLD). Global strategy for prevention, diagnosis and management of COPD. 2025. Available from: <https://goldcopd.org/2025-gold-report/> (Accessed 25 November 2024)



הקווים המנחים של GOLD אינם ממליצים על מתן טיפול ב- ICS+LABA בחולי COPD וטיפול במשאך טריפל הוא טיפול הבחירה כאשר יש צורך ב-ICS

Management of patients currently on ICS+LABA*



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GOLD recommendations for patients under existing treatment with ICS+LABA therapy:

Escalate to triple therapy

- Previous exacerbation history with positive response to ICS and high symptom load, or
- Current exacerbations and EOS ≥ 100 cells/ μ L

Change to LABA/LAMA

- No exacerbation history, or
- Current exacerbations and EOS < 100 cells/ μ L

Benefits and risks of ICS withdrawal should be carefully considered, with a blood EOS ≥ 300 cells/ μ L being an indicator of increased risk of exacerbations with ICS withdrawal



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משאך הטריפל טריקסאו - מפחית תמותה, ללא תלות בכוח שאיפה

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*GOLD notes that the benefits and risks of ICS withdrawal should be carefully considered, with a blood EOS ≥ 300 cells/ μ L being an indicator of increased risk of exacerbations with ICS withdrawal; †patient previously had exacerbations and responded to ICS-LABA treatment

EOS, eosinophils; GOLD, Global Initiative for Chronic Obstructive Lung Disease; ICS, inhaled corticosteroid(s); LABA, long-acting beta2-agonist; LAMA, long-acting muscarinic antagonist

Res: GOLD. Global strategy for prevention, diagnosis and management of COPD. 2025. Available from: <https://goldcopd.org/2025-gold-report/> (Accessed 23 November 2024)