CAPTAIN Study: Simultaneous Step-up to High Dose Fluticasone Furoate and Addition of Umeclidinium for the Treatment of Inadequately Controlled Asthma


Background

Despite adherence to inhaled corticosteroid (ICS)/long-acting β-agonist (LABA) therapy, 10% of patients with asthma remain symptomatic and poorly controlled. The CAPTAIN (Capricious Airway Disease: Phenotypic Treatment of Inadequately Controlled Asthma with TheraPists) study included patients with asthma inadequately controlled on ICS and long-acting β-agonist (LABA) therapy, and who had a history of moderate/severe exacerbations and symptom control in patients with asthma inadequately controlled on ICS/LABA.

Methods

2018 participants were included in the intent-to-treat (ITT) population. All patients received FF/VI 100/25 mcg (either as a single step-up or as step-up to FF/UMEC/VI 100/31.25/25 mcg after 24 weeks) and led to the greatest improvement overall (across all endpoints) among the single-step-up groups (Figure 1).

Results

A separate presentation analyzing data from the CAPTAIN study revealed that single-step-up groups had no increased risk of AEs compared with FF/VI 100/25 mcg. In addition, the single-step-up FF/UMEC/VI 200/62.5/25 mcg versus FF/VI 100/25 mcg led to the greatest improvement overall among the single-step-up groups (Figure 1).

Conclusions

Simultaneous step-up to FF 200 mcg and addition of UMEC 52 mcg led to the greatest improvement in lung function and reduces exacerbation rates in patients with asthma. The study showed that single-step-up therapy was effective and safe for improving lung function and reducing exacerbation rates in patients with asthma. Notably, the population was not matched or controlled by baseline characteristics.