

PART 1

吸入制剂的发展趋势

吸入疗法是哮喘药物治疗的首选

GINA2015年指南强调:

- 糖皮质激素及速效 β_2 激动剂**吸入疗法**是成人及儿童哮喘药物治疗**首选**



ROUTE OF ADMINISTRATION

- **Inhaled administration** delivers drugs directly into the airways, producing higher local concentrations with significantly less risk of systemic side effects.
- **Inhaled therapy** is the cornerstone of asthma treatment for children of all ages.

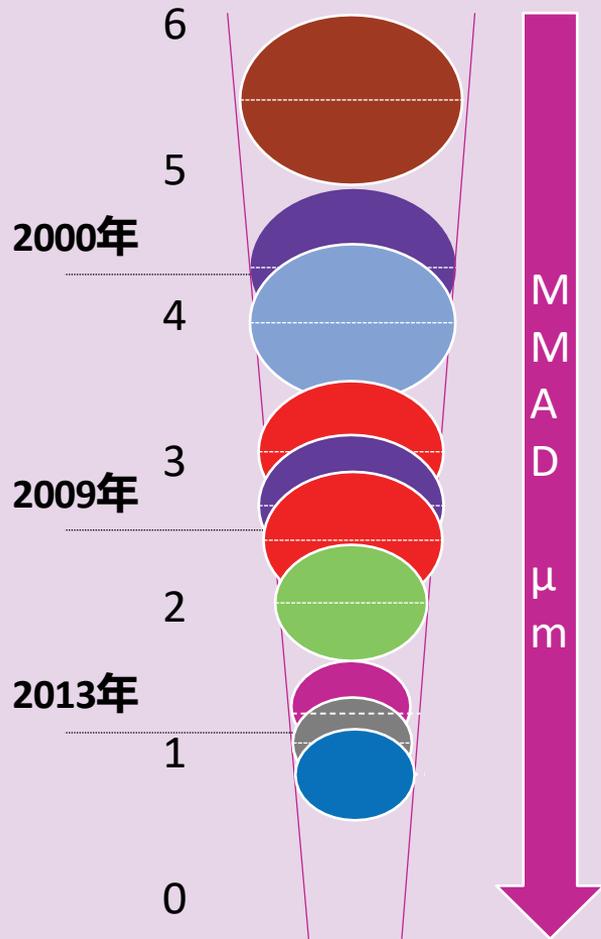
CONTROLLER MEDICATIONS

- **ICS** are **the most effective** anti-inflammatory medications for the treatment of persistent asthma.

RELIEVER MEDICATIONS

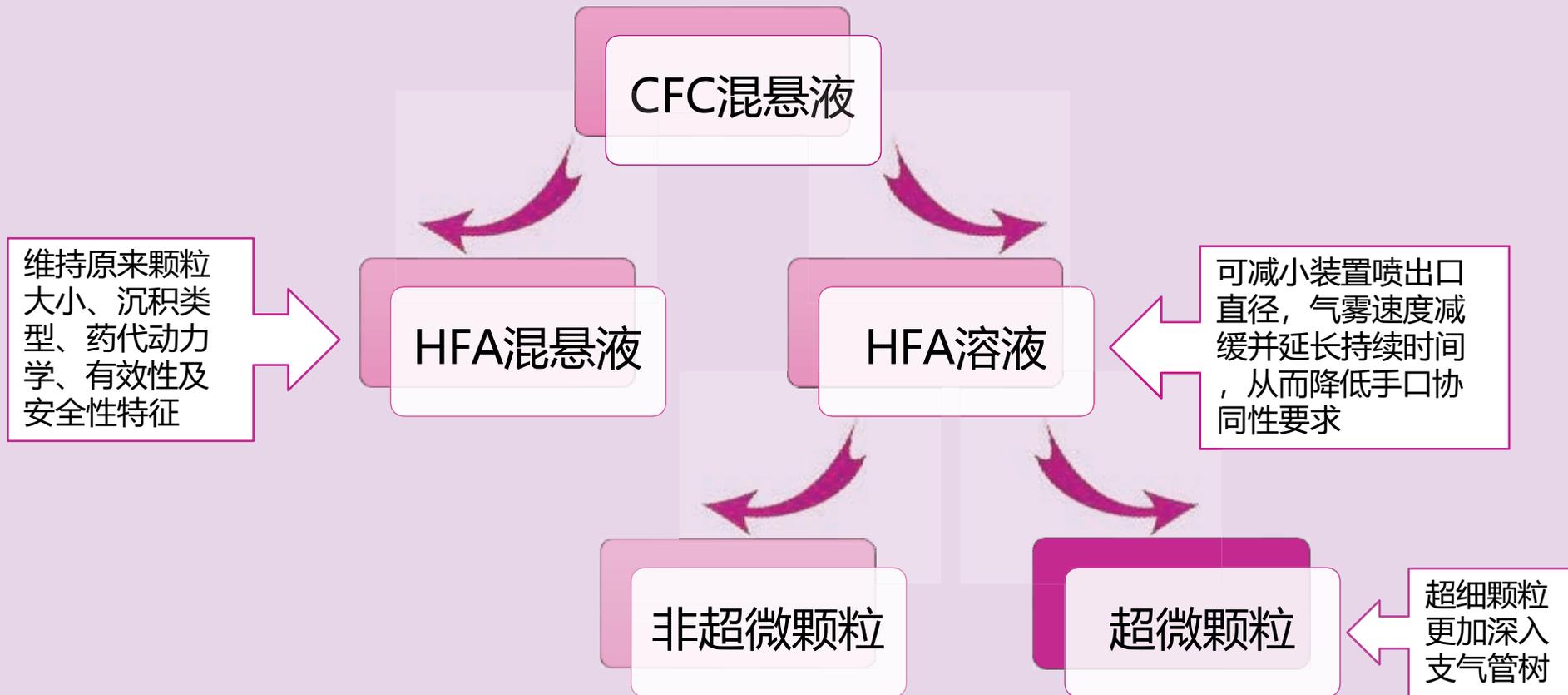
- **Inhaled SABAs** are the medications of choice for relief of bronchospasm during acute exacerbations of asthma and for the pretreatment of exercise-induced bronchoconstriction.

超微颗粒pMDI制剂或许将成为ICS制剂的发展新趋势

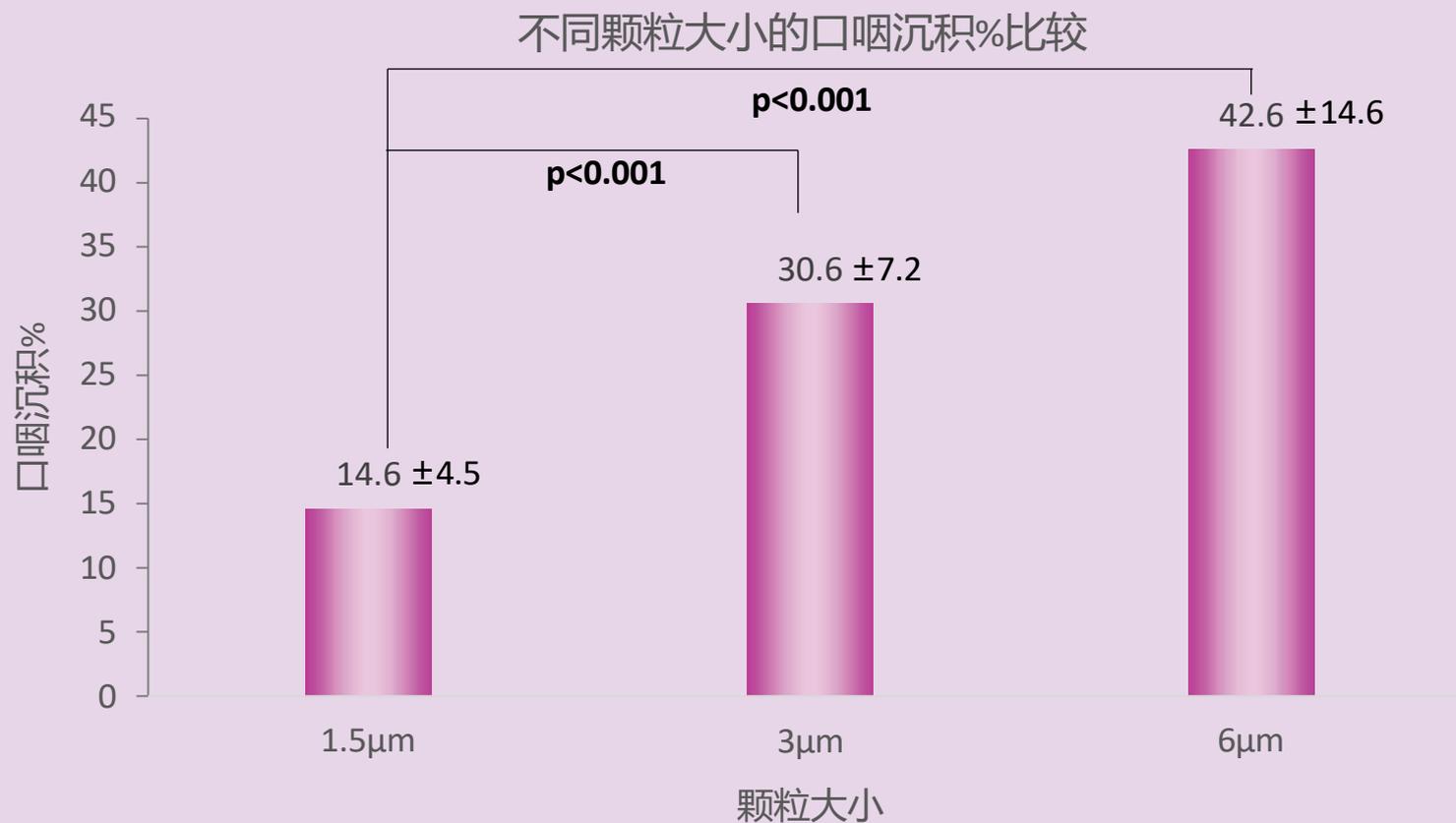


常用ICS	商品名	颗粒直径
丙酸氟替卡松干粉	Flixotide Discus [®]	5.4
布地奈德干粉	Spirocort Turbuhaler [®]	4.0
布地奈德干粉	Giona Easyhaler [®]	4.0
丙酸氟替卡松+福莫特罗pMDI	Flutiform [®]	3.2
布地奈德+福莫特罗干粉	DuoResp Spiromax [®]	2.5
丙酸氟替卡松pMDI	Flixotide [®]	2.4
糠酸氟替卡松+维兰特罗	Relvar Ellipta [®]	2.3
丙酸倍氯米松+福莫特罗pMDI	Fostair[®]; Innovair[®]	1.1-1.5
丙酸倍氯米松pMDI	Qvar [®] ; Aerobec [®]	1.1
环索奈德pMDI	Alvescl [®]	1.1

pMDI制剂的演变与发展

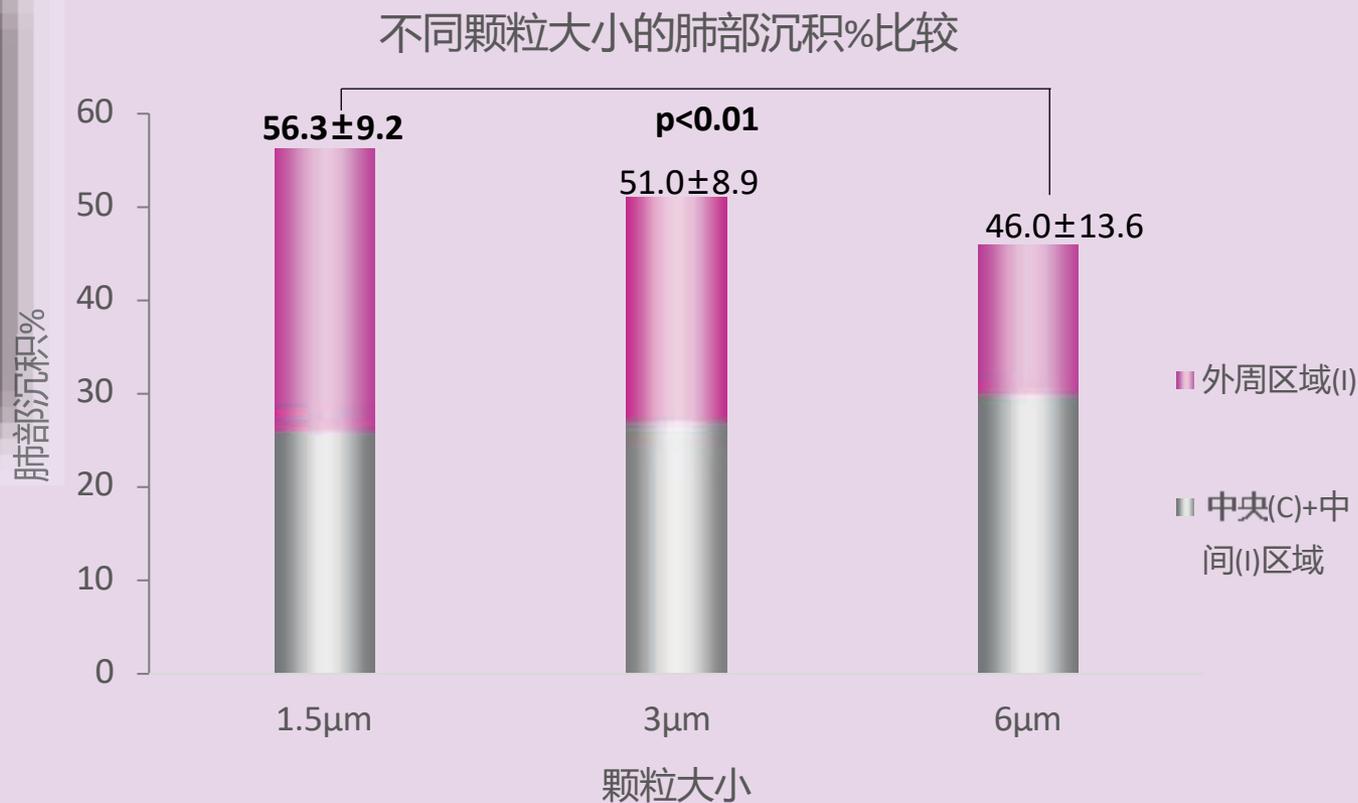
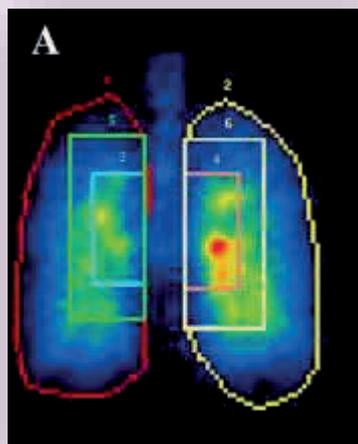


颗粒直径的差异导致口咽沉积率不同



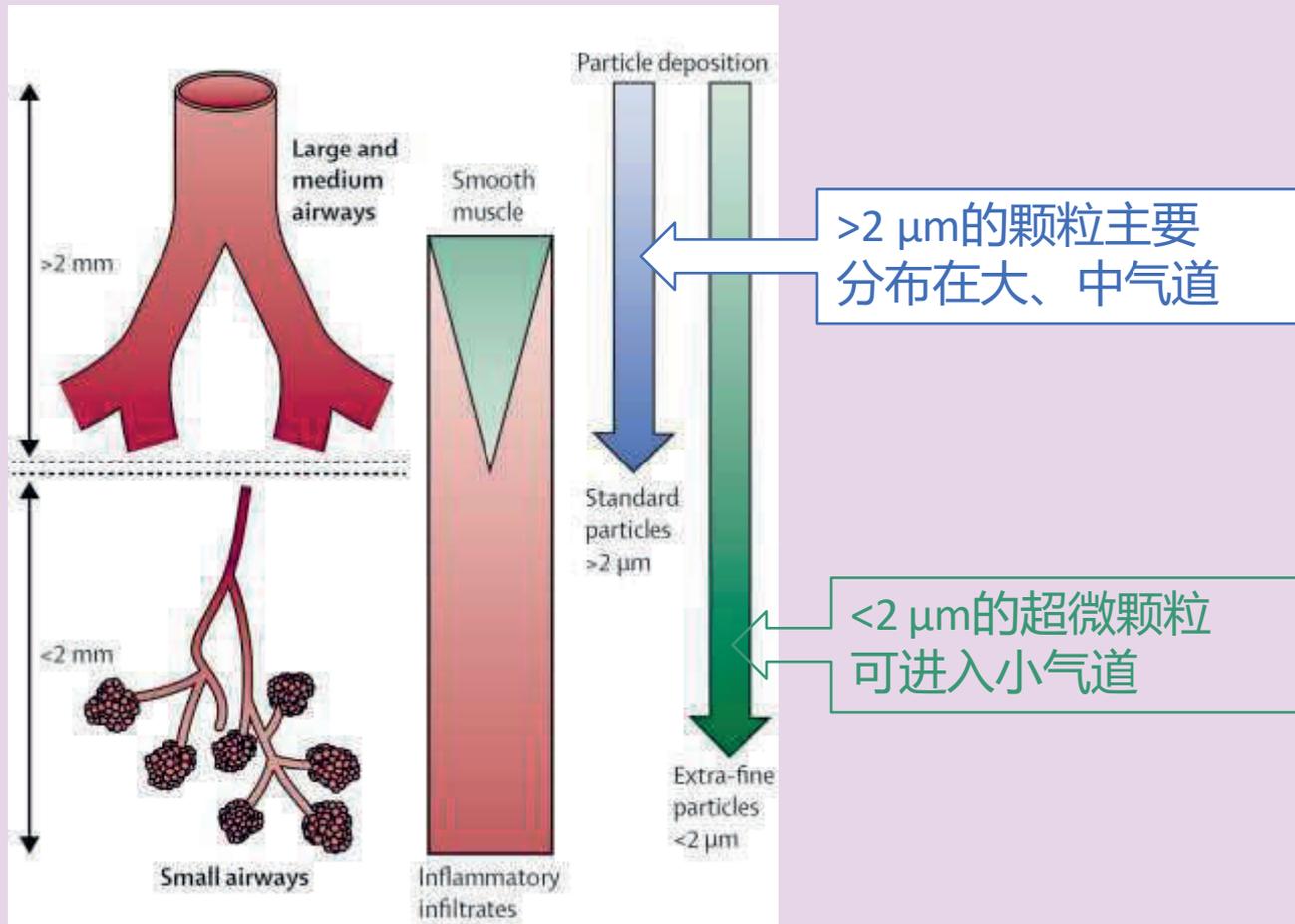
超微颗粒=更低口咽沉积率

颗粒直径的差异导致肺沉积率不同



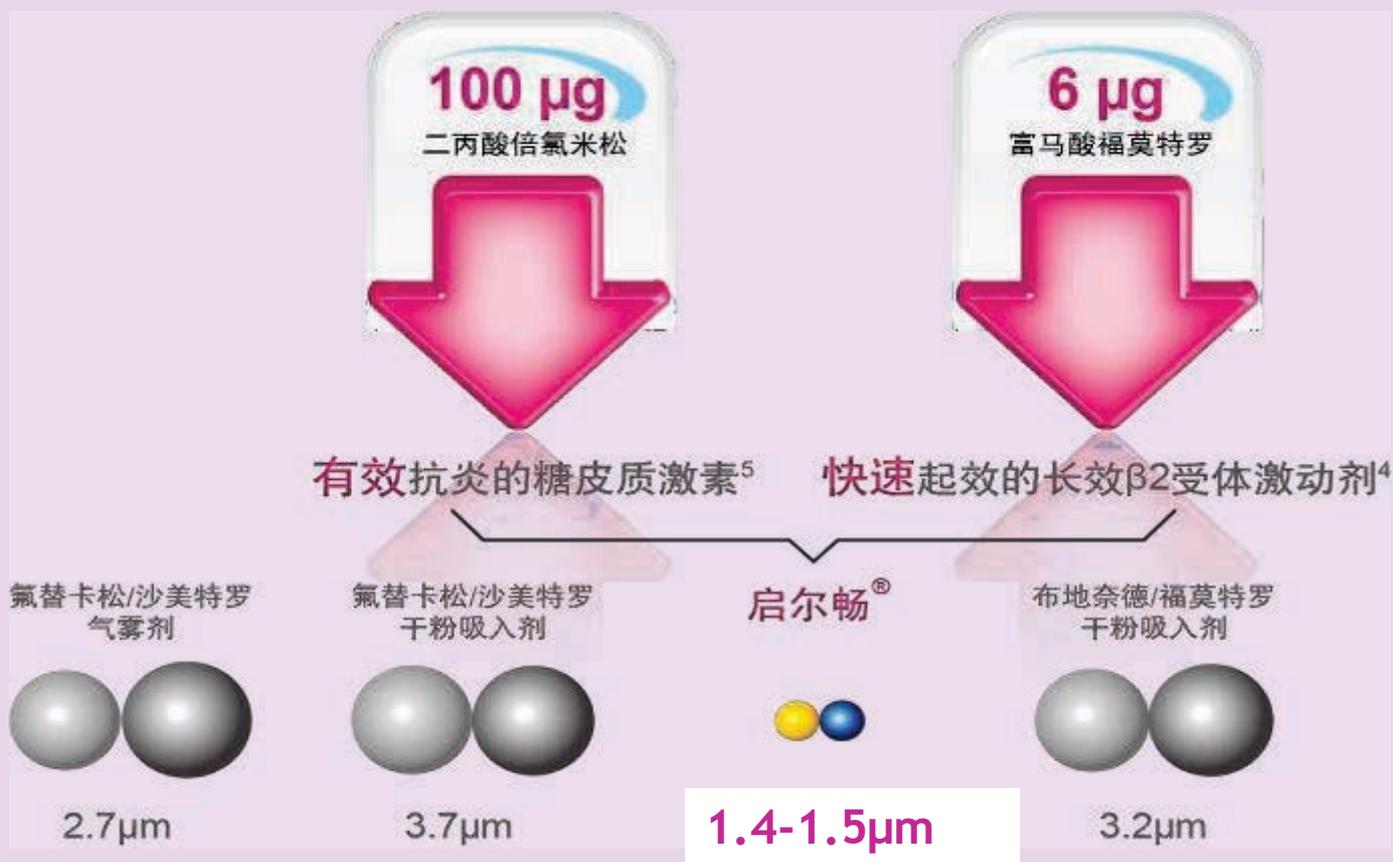
超微颗粒=更高的肺部沉积率

颗粒直径的差异导致药物在气道的分布不同



超微颗粒=更全面覆盖支气管树

启尔畅®: 超微颗粒联合制剂 颗粒直径是传统吸入剂的一半



通过压力定量吸入器给药 (pMDI) 使用氢氟烷-134a (HFA) 作为空气抛射剂,不含氟利昂 (CFC)

以上内容仅为本文档的试下载部分，为可阅读页数的一半内容。如要下载或阅读全文，请访问：<https://d.book118.com/878131026004006130>