



Dispensing and the drive for environmental sustainability

Assessment of Combination Long-Acting Beta Agonists (LABAs) and Inhaled Corticosteroids (ICS) Part 4

We continue our journey to transform Respiratory care to the lowest possible carbon impact by looking at Combination LABA plus ICS inhalers this month. Chlorofluorocarbons (CFCs) inhaler propellants contained in pMDIs (pressurised Metered Dose Inhaler) were recognised as ozone depleting substances and were phased out in the UK by 1996. CFCs were replaced by 'CFC-free' inhalers containing hydrofluorocarbons (HFCs). Although HFCs are not ozone depleting substances, they are powerful greenhouse gases which can contribute to global warming. Carbon emissions from inhalers have been assessed as being responsible for approximately 3% of all NHS carbon emissions.

The NICE patient decision aid gives an indicative range for DPI (Dry Powder Inhalers) and pMDIs:

- **DPIs (1 dose (two puffs)): 20 g CO₂e per dose**
- **pMDIs (two puffs): 500 g CO₂e per dose**

This is, unfortunately, not the full story, as some pMDIs have a higher indicative carbon footprint when compared with other pMDIs.

Even though the Environmental Sustainability indicators have been removed from the Investment and Impact Fund (IIF) 2023/24 Incentive scheme, there is still a great need to reduce the carbon footprint of inhalers.

Most LABA Plus ICS products are available as both MDIs and DPIs. Dispex has assessed the impact on profitability of all these inhalers and this information can be accessed via the **Brand Comparisons** section of the Dispex website which is a Members' only resource. The profitability comparisons include figures on the website showing the profitability of prescribing generically and dispensing a particular brand, which can make a significant difference between dispensing at a loss and ensuring your dispensary viability.

The following 6 combinations are available:

Beclometasone + Formoterol
Budesonide + Formoterol
Fluticasone + Formoterol
Fluticasone + Salmeterol
Fluticasone + Vilanterol
Mometasone + Indacaterol

In the previous 3 articles we looked at Fluticasone + Salmeterol, Budesonide + Formoterol and Beclometasone + Formoterol. In this article we will be assessing the remaining 3 combinations. Some combinations do not have DPI alternatives and in those cases, patients will need to be seen face to face to switch them over to a DPI.

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Switching MDIs to cheaper products should be relatively easy, but switching to DPIs requires a check on inhaler technique. To see the profitability of these products, members can view the data within our **Brand Comparisons** section – Inhalers – Combinations. Please note that Relvar Ellipta must be ordered from PSUK to obtain discount. It does not contribute to the low-cost surcharge.

Brand	Strength	Doses	Basic Price	Aerosol vs Non-Aerosol
Indacaterol + Mometasone				
Aectura Breezhaler	125/62.5	30	£17.49	BADPI
Aectura Breezhaler	125/127.5	30	£21.50	BADPI
Aectura Breezhaler	125/260	30	£27.97	BADPI
Vilanterol + Fluticasone				
Relvar Ellipta	22/92	30	£22.00	BADPI
Relvar Ellipta	22/184	30	£29.50	BADPI
Formoterol + Fluticasone				
Flutiform 50	50	120	£14.40	MDI
Flutiform 125	125	120	£28.00	MDI
Flutiform 250/10	250	120	£45.56	MDI

The profitability of all LABA + ICS Combinations can be found in the **Brand Comparisons** section of the Dispex website. As always, the patients' clinical needs must come first and the most appropriate inhaler for each individual patient must be prescribed, be that an MDI or DPI.

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