**Real world effectiveness of changing fixed-dose combination therapy from Seretide® metered dose inhaler (MDI) to Flutiform® in UK asthma patients**

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**Aim:**
To investigate the success of changing fixed dose combination therapy from Seretide® (fluticasone propionate salmeterol: FP/SAL) to Flutiform® (fluticasone propionate formoterol: FP/FOR) in asthma patients.

**Method:**
Observational study of UK primary care patients from the Optimum Patient Care Research Database changing fixed-dose combination therapy from FP/SAL via MDI to FP/FOR. Patients aged 12-80 with asthma diagnosis and/or ≥2 prescriptions for asthma therapy 1 year prior to first FP/FOR prescription. Primary outcome was "change success" defined as ≥70% of patients with ≥1 prescription for FP/FOR 6 months following therapy change (not including first prescription). Patient characteristics during year prior to FP/FOR prescription were analysed and compared with patients prescribed FP/SAL prescribed as repeat prescription (Mann-Whitney and $\chi$ 2 tests where appropriate). Oral steroid use in FP/FOR patients was compared 6 months pre- and post-switch using McNemar-Bowker test.

**Results:**
Of 164 patients changing their therapy to FP/FOR, 88.4% had at least 1 further FP/FOR prescription 6 months following the change. 164 FP/FOR patients were compared with 6,228 FP/SAL patients. Overall baseline characteristics were similar although FP/FOR patients were significantly older, more likely to be current smokers and with more lower respiratory tract infection consultations leading to antibiotic prescriptions. 6-month effectiveness analysis before and after FP/FOR switch showed no significant differences in number of oral steroids prescriptions ($p = 0.175$).

**Conclusion:**
Change success was achieved with 88.4% of FP/FOR patients receiving a second prescription 6 months following therapy change with no loss of asthma control.

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