The Canadian Thoracic Society announces publication of the
2023 CTS Guideline on Pharmacotherapy in Patients with Stable COPD

September 8, 2023

OTTAWA, ON – The Canadian Thoracic Society (CTS) is pleased to announce the online publication of the CTS Guideline on Pharmacotherapy in Patients with Stable Chronic Obstructive Pulmonary Disease (COPD). This Guideline has now been published in the Canadian Journal of Respiratory, Critical Care and Sleep Medicine, and co-published in the CHEST Journal.

Dr. Jean Bourbeau, Past CTS President and lead author of the guideline emphasized the importance of the Guidelines, stating, “The 2023 CTS COPD Pharmacotherapy Guidelines provide a clear, evidence-based approach to the implementation of inhaled and oral therapies in the management of COPD.”

The guideline stems from a comprehensive systematic review incorporating meta-analysis and expert-informed clinical remarks. It’s goal is to optimize maintenance pharmacological therapy, with a focus on alleviating dyspnea, improving health status, preventing exacerbations and reducing mortality for individuals with stable COPD.

This updated guideline builds upon the 2019 edition of the CTS Clinical Practice Guideline on Pharmacotherapy in Patients with COPD. Reflective of the latest research and clinical evidence in COPD management, these guidelines are poised to enhance patient care and outcomes.

Key changes from the 2023 Guideline Update include:

- Highlighting that the pharmacotherapy recommendations should NOT be implemented in a step-up manner but rather, a proper assessment of the patient should take place and that the patient be then provided with the optimal therapy to improve outcomes, including quality of life, improved exercise tolerance, reductions of acute exacerbations of COPD and reducing mortality.

- Pharmacotherapy changes:
  - Low Symptom burden patients (CAT<10 and/or mMRC<1 and/or FEV1 >80%): First-line therapy is either a LAMA or LABA (change from 2019)
  - High Symptom burden patients (CAT>10 and/or mMRC >/= 2 and/or FEV1 <80%) and a Low risk of future AECOPD: First-line therapy is LAMA/LABA (change from 2019)
  - High Symptom burden patients (CAT>10 and/or mMRC >/= 2 and/or FEV1 <80%) and a High risk of future AECOPD: First-line therapy is LAMA/LABA/ICS (change from 2019)

- We are the first guideline to assess in a systematic manner how maintenance pharmacotherapies can reduce mortality in a high-risk population.

According to Dr. Mohit Bhutani, CTS President, “The guidance is based on an extensive review of the medical literature incorporating the latest evidence to improve exercise tolerance, quality of life, reduce exacerbation frequency and reduce mortality.” Dr. Bhutani emphasized the CTS’ ongoing commitment to providing high-quality guidance for clinicians in Canada and across the globe.
The Guideline is now published in the CTS’ official Journal, the *Canadian Journal Respiratory, Critical Care and Sleep Medicine*, with PDFs available for download at: https://www.tandfonline.com/doi/full/10.1080/24745332.2023.2231451. The Guideline can also be accessed on the CTS website guideline library at: https://www.cts-sct.ca/guideline-library/.

About the Canadian Thoracic Society

The Canadian Thoracic Society (CTS) is Canada’s inter-professional specialty society and membership association for respirology, including specialists, primary care physicians, researchers, and health care professionals from multiple disciplines such as physical therapy. CTS promotes lung health by enhancing the ability of physicians and other healthcare professionals through collaboration, research, learning and advocacy and promoting the best respiratory practices in Canada. CTS Guidelines are characterized by a high level of methodological rigor, ensuring the utmost reliability in their development.

For media inquiries or further information about the guideline, please contact:

Scott Mitchell – Manager, Knowledge Mobilization – smitchell@cts-sct.ca

To request further information: cts-sct.ca / info@cts-sct.ca / @CTS_SCT