Increasing Access to Inhaled Medicines for COPD and Asthma



With 5 years left to achieve the Sustainable Development Goals and the 4th High-level Meeting of the United Nation's General Assembly on the Prevention and Control of Noncommunicable Diseases in September 2025, now is the time to advance access to quality, affordable, effective

Forum of International Respiratory Societies (FIRS)



The burden of COPD and asthma is massive and rising

Chronic obstructive pulmonary disease (COPD) and asthma cause a massive and rising burden of death ar disability, placing enormous demands on households arhealthcare systems. Most of this burden is preventable and treatable, including with inhaled medicines.

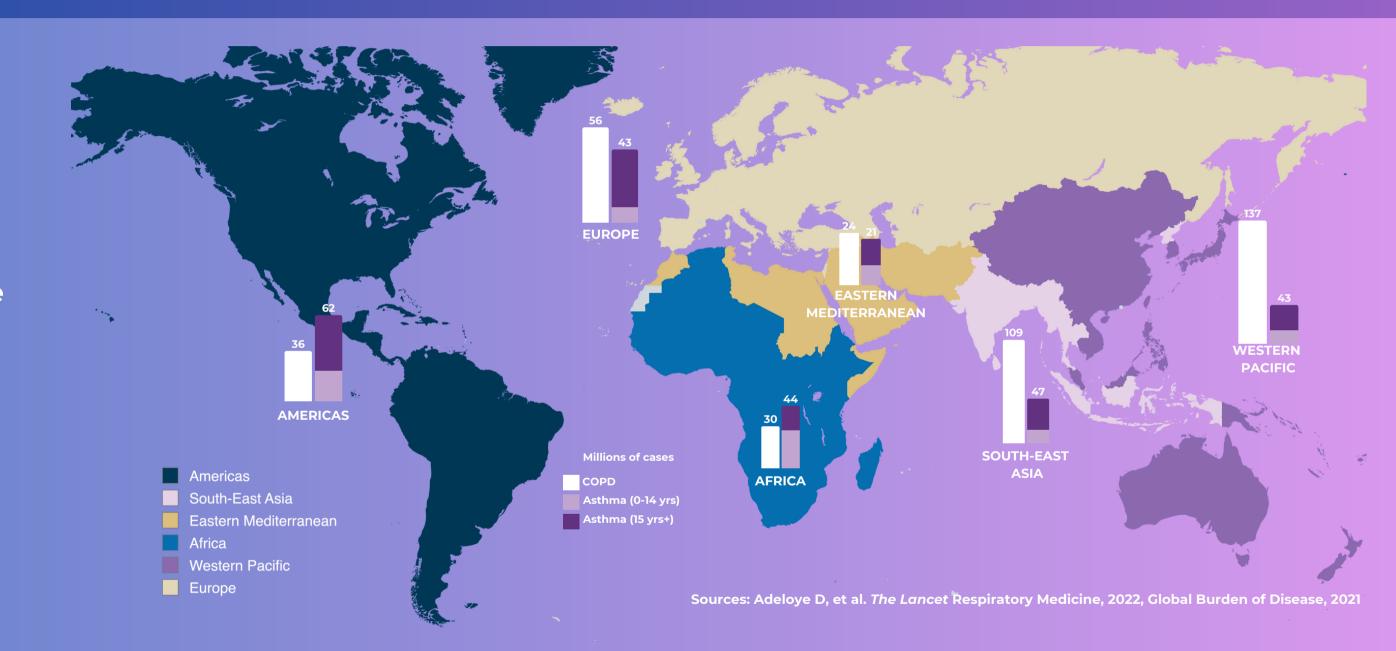
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652 million people live with COPD and asthma

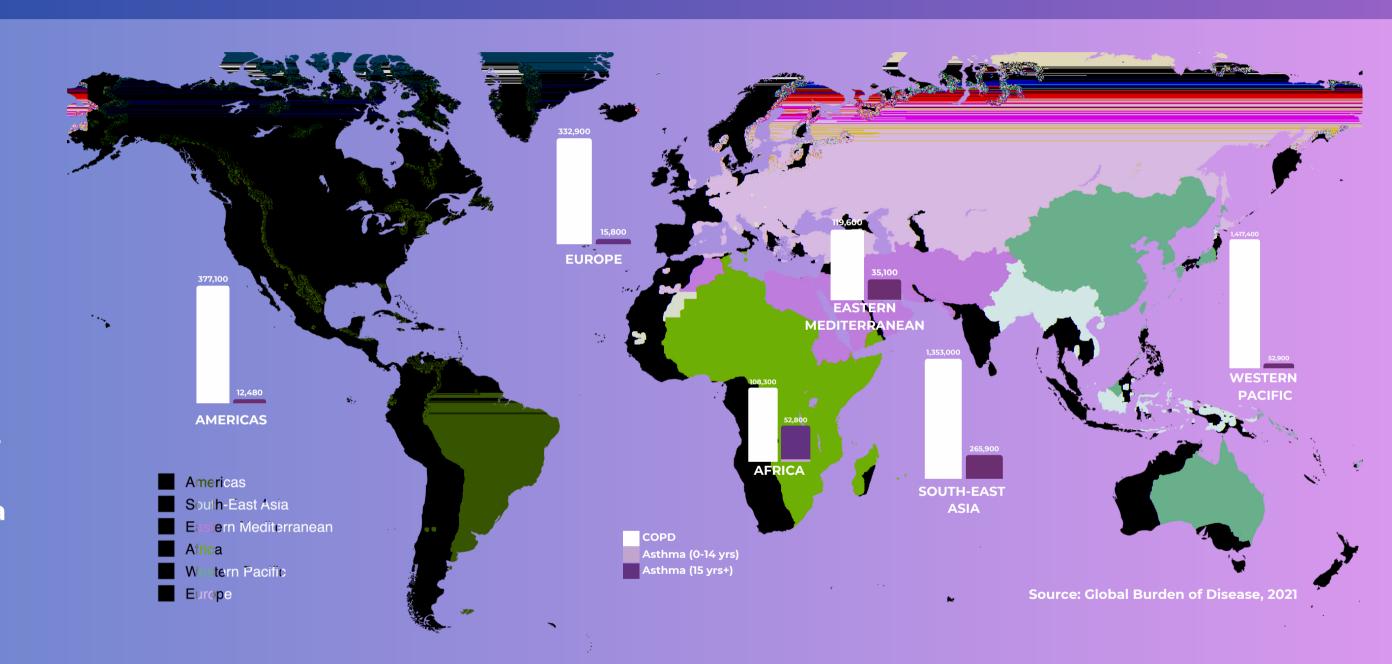
- 652 million cases in 2021.
 - 392 million COPD
 - 260 million asthma
- 63% of COPD cases are in the Western Pacific and South-East Asia.
- Asthma cases concentrate in the Americas (24%),
 South-East Asia (18%), Africa (17%), and Western Pacific (17%).





COPD and asthma kill 4.1 million people each year

- 4.1 million deaths in 2021.
 - 3.7 million COPD deaths
 - 436,000 asthma deaths
- 74% of COPD deaths are in the Western Pacific and South-East Asia.
- 60% of asthma deaths across all ages occur in South-East Asia, but 47% of child asthma deaths are in Africa.





80% of COPD deaths are in 20 countries

China*
India*
Türkiye*
USA
Japan
Russia
Bangladesh*
Pakistan*
Brazil*
Germany
Viet Nam*
Rusive*
Mexico*
North Korea*
Spain
Italy

• Myanmar*

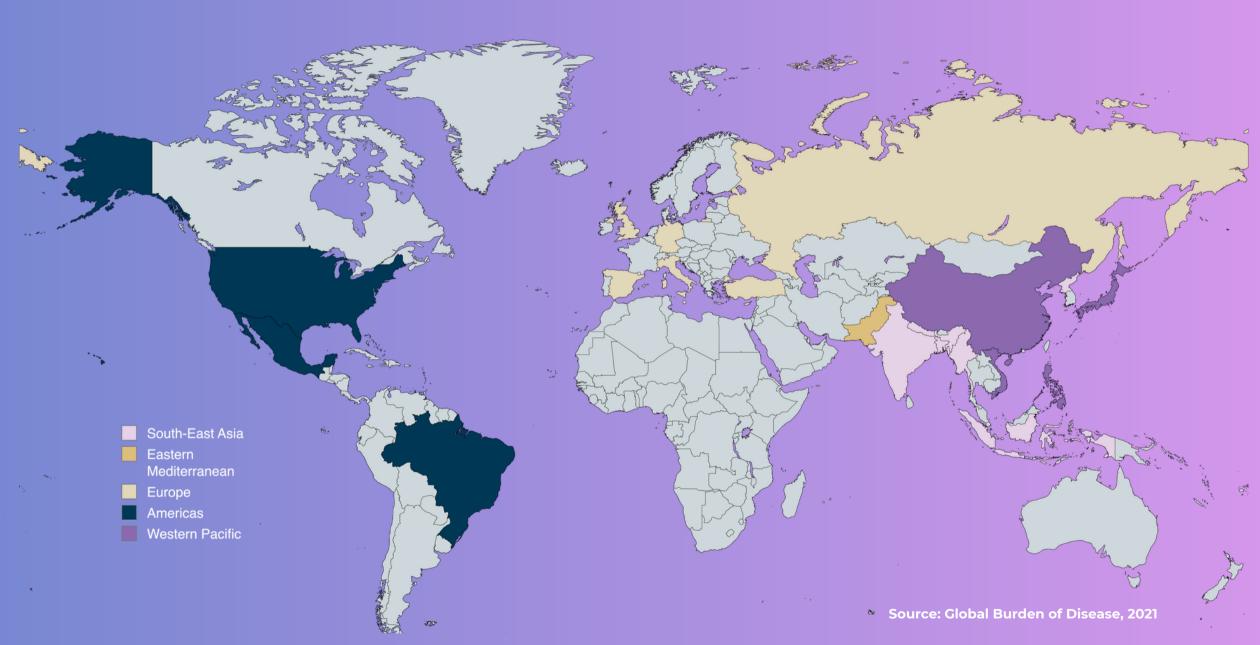
Kingdom

United

*Low- and middle-income countries

• Nepal*

• Philippines*



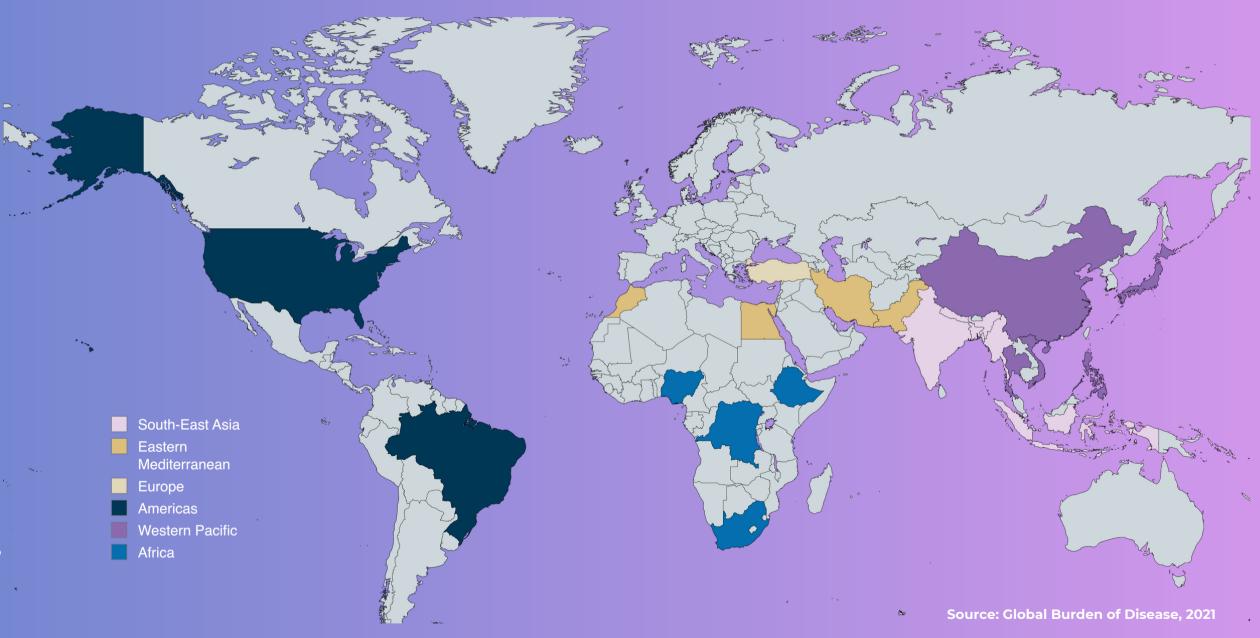


90% of asthma deaths are in 20 countries





*Low- and middle-income countries





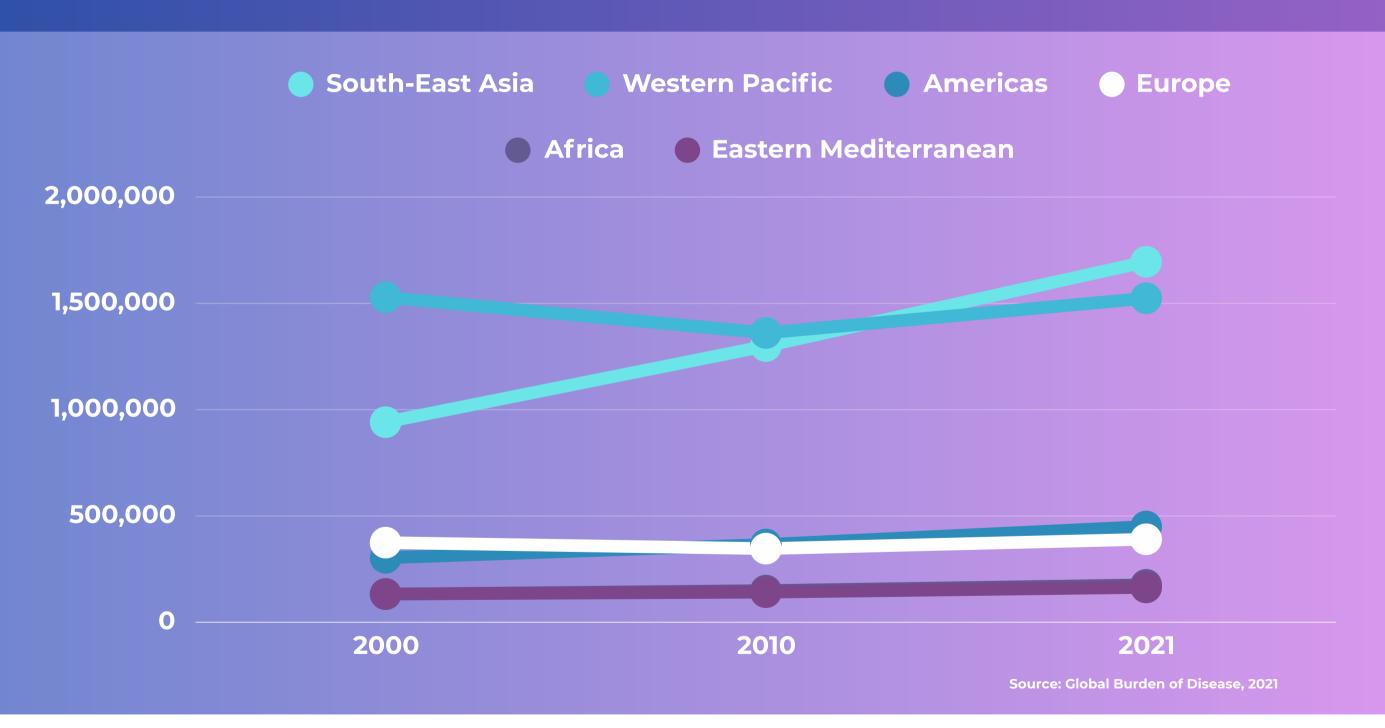
COPD deaths are rising sharply in most regions

COPD deaths rose by 29% between 2000 and 2021.

• South-East Asia (92%), the Americas (48%), and Africa (44%).

COPD deaths rose by more than 60% in:

- Türkiye
- India
- Nepal
- Philippines
- Mexico
- Indonesia





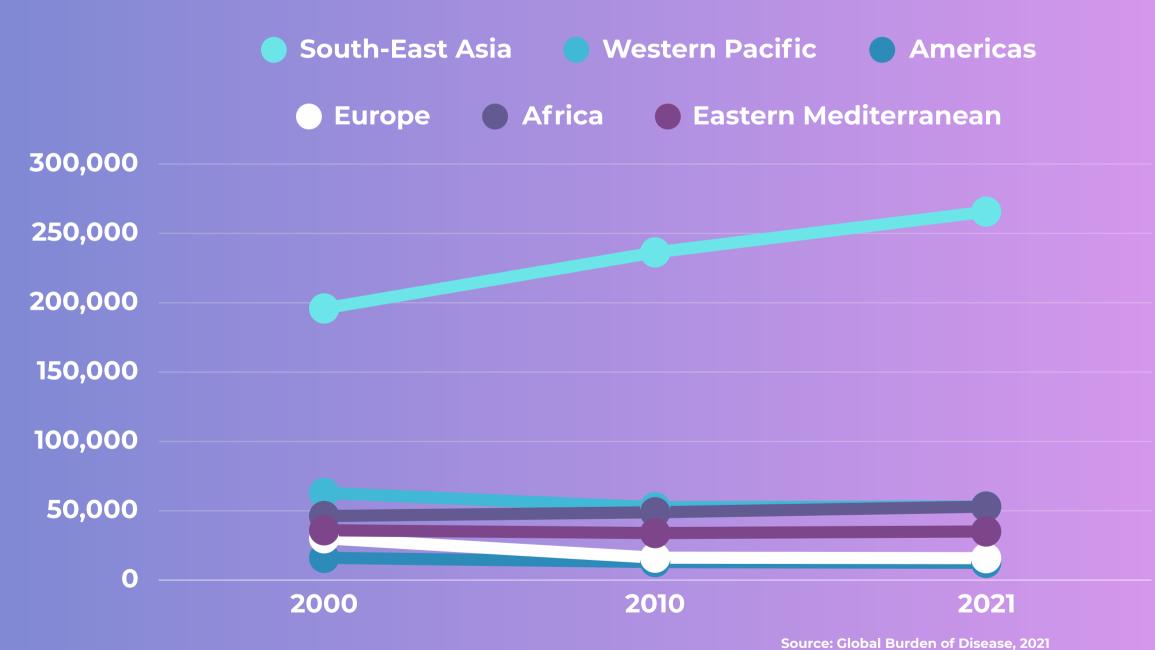
Asthma deaths are also rising overall, but not in all regions

Asthma deaths rose by 12% between 2000 and 2021.

- Increases in South-East Asia (36%) and Africa (15%)
- Declines in Europe (-48%), Americas (-23%), Western Pacific (-16%), and Eastern Mediterranean (-12%)

Asthma deaths rose by more than 20% in:

- India
- Nepal
- Democratic Republic of Congo
- Philippines
- Morocco







COPD and asthma impose a massive burden on society

Healthcare costs:

- hospitalization
- medicines

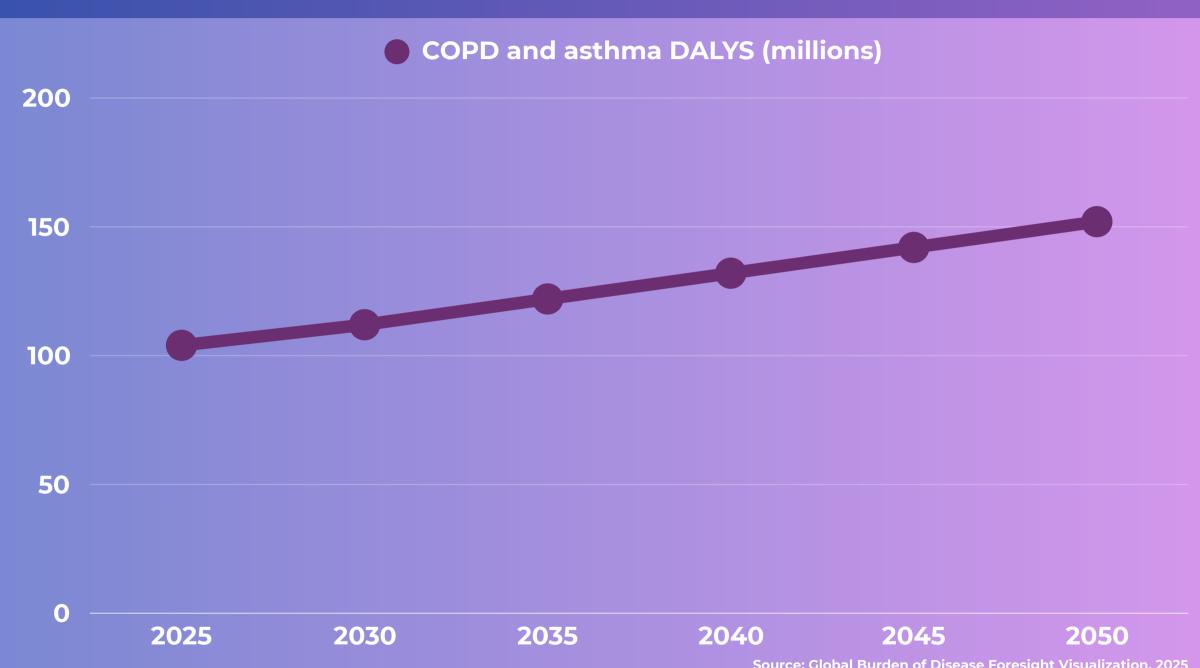
Educational costs:

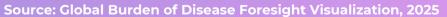
 lost school days, especially for children with asthma

Economic costs:

- lost work days
- reduced productivity
- lost wages

Costs will continue to rise with population growth and longer lifespans.







Inhalers are proven to reduce disease severity and death

Inhalers contain medicines - including bronchodilators and corticosteroids and combinations of these - that deliver medication directly to the lungs. By preventing COPD and asthma exacerbations, they reduce the risk of death and enable people to manage their condition, lead normal lives, and engage in education, work, and sport.

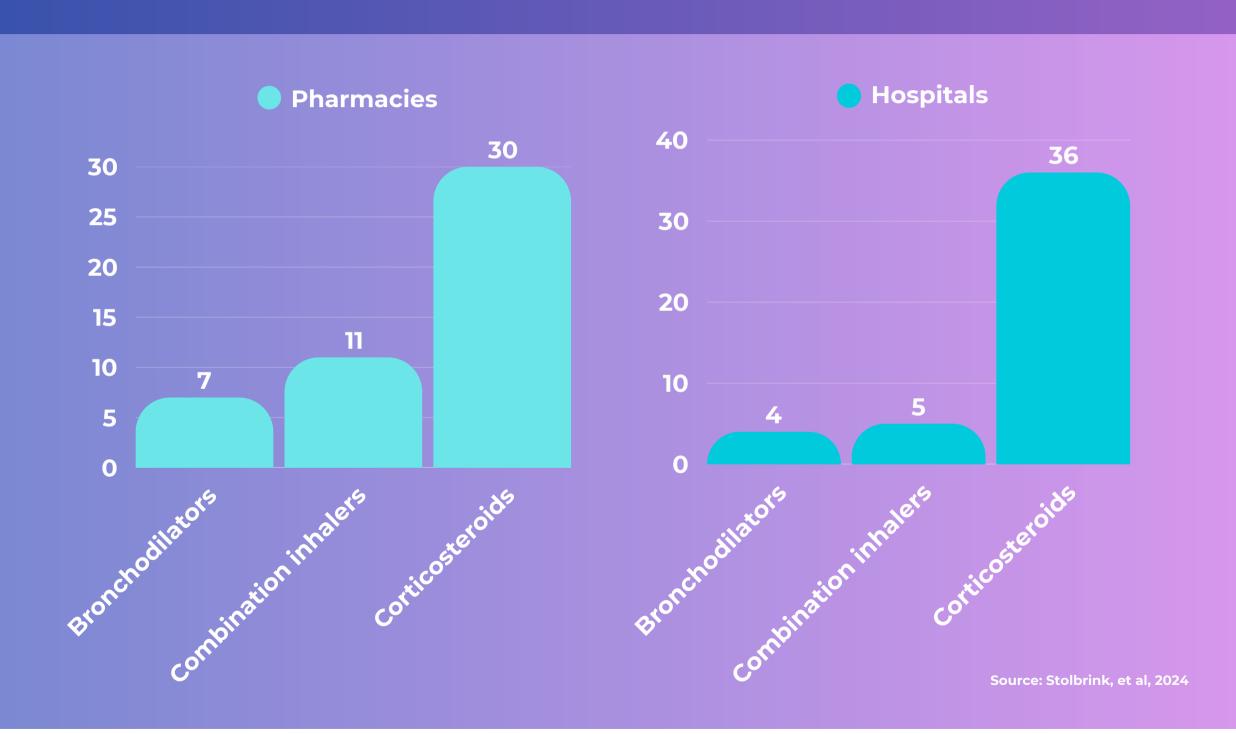


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Affordable inhalers are hard to find in LMICs

- Long-acting inhaled bronchodilators:
 - 7% of pharmacies
 - 4% of hospitals
- Combination long-acting inhaled bronchodilators and corticosteroids:
 - 11% of pharmacies
 - 5% of hospitals
- Inhaled corticosteroids:
 - 30% of pharmacies
 - 36% of hospitals

Most LMICs have not achieved NCD Action
Plan target of at least 80% of health
facilities with inhalers.





Inhalers often cost more than a week's wages

Inhalers can cost more than a week's wages for a month's supply in many LMICs.

• Corticosteroid inhalers much more expensive than bronchodilators.

Too many patients rely on cheaper and potentially harmful treatments.

BRONCHODILATORS
(short-acting)
1-4 days'
wages

BRONCHODILATORS
(long-acting)
6-26 days'
wages

INHALED CORTICOSTEROIDS

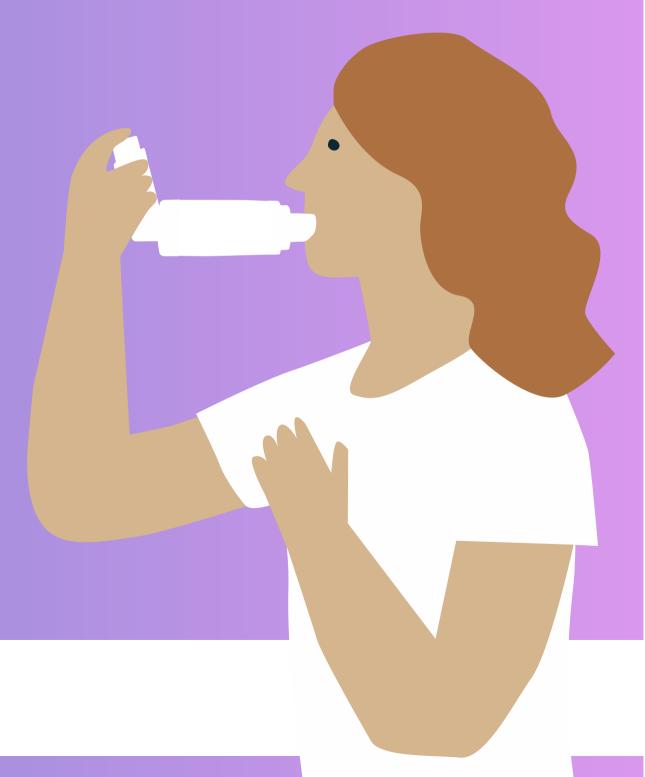
2-107 days' wages



The cost-effectiveness of affordable inhalers is well documented

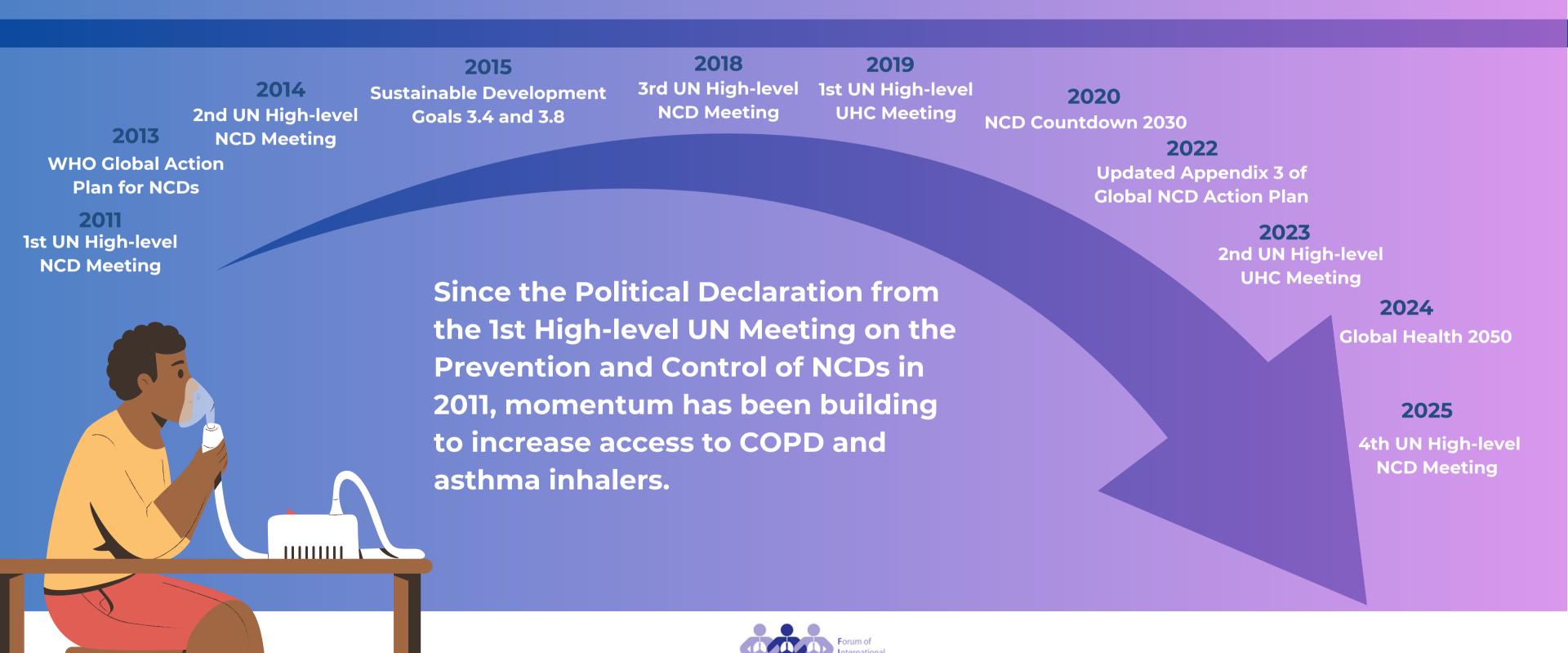
After Brazil introduced free inhaled medicines for asthma care, household costs fell from 29% of income to 2% and the hospitalisation rate fell from 90 per 100,000 to 60 per 100,000 people.

Comaru et al. Free asthma medications reduces hospital admissions in Brazil, Respiratory Medicine, 2016





Momentum for action on access to inhalers is building



Why we need action on inhaled medicines now

Probability of a 30 year old dying from chronic respiratory disease before they turn 70 has barely changed in last decade (19%-18%).

Most countries off-track to achieve NCD Action Plan target of 25% reduction by 2025 and SDG 3.4 target of one-third reduction by 2030.

