

INHALE.
EXHALE.
EASYHALE.™



SUSTAINABILITY



EASYHALER
PRODUCT RANGE



REFERENCES



MART



Carbon
Neutral
Product



RESEARCHED, DEVELOPED,
AND MANUFACTURED IN FINLAND.

ORION
PHARMA

BENEFITS FOR PATIENTS AND PHYSICIANS

Easyhaler® is a multidose dry powder inhaler (DPI), developed for the treatment of asthma and chronic obstructive pulmonary disease (COPD).¹⁻⁶ Easyhaler provides several benefits to patients and physicians and delivers effective and well-tolerated therapies.¹⁻⁶ Easyhaler generates accurate and consistent dose delivery



Carbon Neutral Product

Carbon Footprint Standard



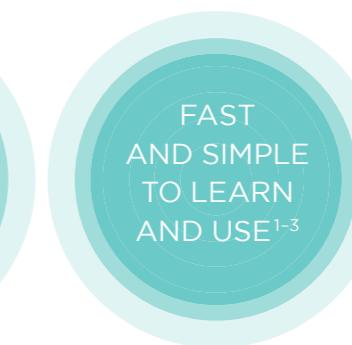
4



EASY TO LEARN

Correct inhaler use is the cornerstone of successful asthma and COPD treatment. Most patients learn to use Easyhaler® correctly in less than 5 minutes, thus also saving physicians' valuable time.^{1,3,4}

5





EASY TO LEARN

— EASYHALER IS QUICK AND SIMPLE TO TEACH, LEARN, AND USE

Errors in inhaler use are common and can compromise successful therapy.⁶ Several studies have demonstrated that Easyhaler is both easy and simple to teach, learn and use.^{1-4,7} The vast majority of patients learn the

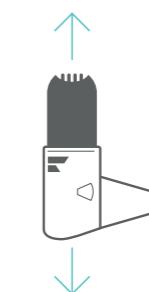
correct use of Easyhaler in less than 5 minutes and almost all physicians consider Easyhaler easy to teach.¹⁻⁴ In practice, patients make fewer critical errors with Easyhaler than with other inhalers.⁵

6

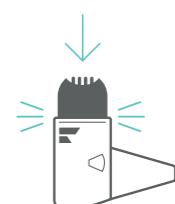


QUICK AND SIMPLE TO USE

1. SHAKE



2. CLICK



3. INHALE



7



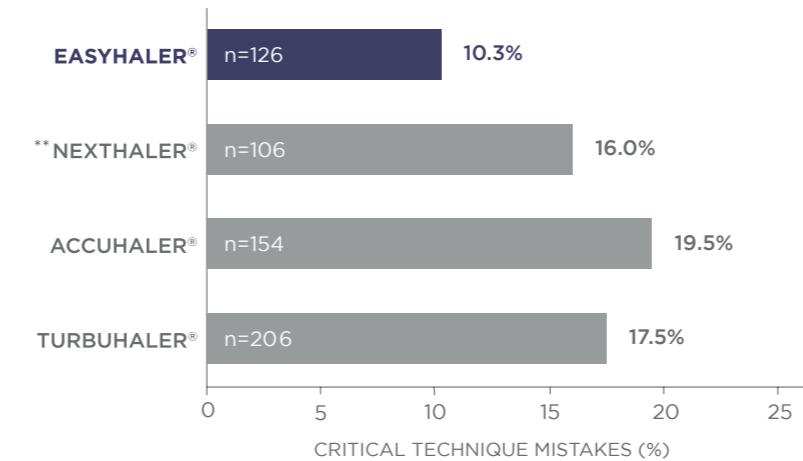
74% OF PATIENTS
LEARNT TO USE EASYHALER
IN LESS THAN 5 MINUTES.¹



MORE THAN 90%
OF PHYSICIANS DESCRIBED EASYHALER AS
EASY TO TEACH.¹



PATIENTS MAKE FEWER CRITICAL ERRORS*
WITH EASYHALER THAN WITH OTHER DPIs.⁵





ACCURATE AND CONSISTENT

99% of patients, with varying age and disease severity, reach the peak inspiratory flow rate of 30 L/min required for a full and effective dose from Easyhaler®.^{1,2,3} This means that the vast majority of patients with asthma or COPD can receive the full dose of medication via Easyhaler.^{1,2,3} Easyhaler offers accurate and consistent dosing at different flow rates.^{3,4}





ACCURATE AND CONSISTENT

— A MAJORITY OF PATIENTS REACH A SUFFICIENT PIF FOR EASYHALER

With Easyhaler, a peak inspiratory flow (PIF) rate of 30 L/min is enough for effective dose delivery.⁵⁻⁷ Studies with pooled analyses show that close to all patients (99%) with asthma or COPD, irrespective of age or the severity of airway obstruction, achieve a PIF rate

of ≥ 30 L/min via Easyhaler.^{1,2} Thus, patients with asthma or COPD can achieve sufficient inspiratory flow via the Easyhaler that is sufficient for its effective use.^{1,2,3} Also, studies have shown that Easyhaler's dose delivery is accurate and consistent at different patient inhalation flow rates.^{3,4,8}

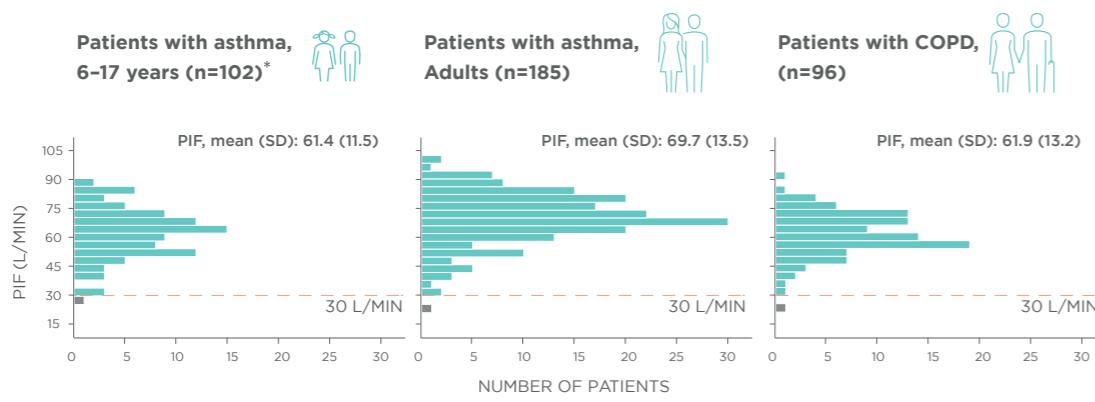


**≥ 30 L/MIN IS A SUFFICIENT PIF RATE
FOR DRUG DELIVERY WITH EASYHALER.⁵⁻⁷**

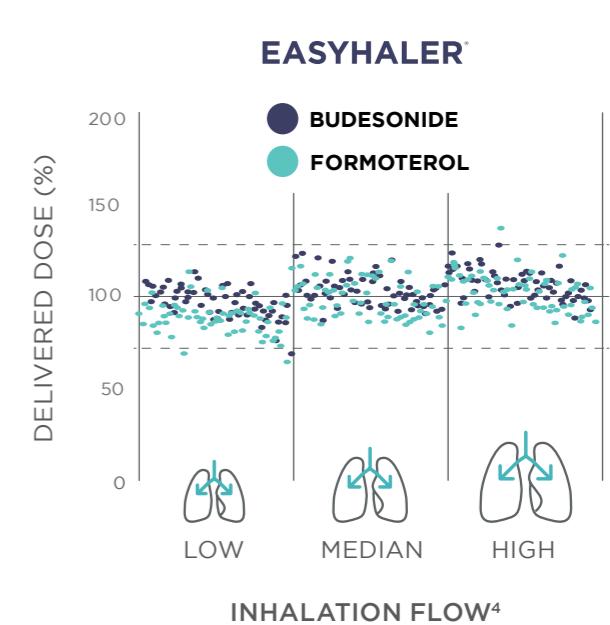


**99% OF PATIENTS WITH ASTHMA OR COPD
REACH A SUFFICIENT PIF THROUGH EASYHALER
REGARDLESS OF AGE OR
DISEASE SEVERITY.^{1,2}**

PIF THROUGH EASYHALER IN ASTHMA AND COPD PATIENTS¹



**EASYHALER PROVIDES
ACCURATE AND CONSISTENT
DOSE DELIVERY
— EVEN WITH LOW
INHALATION FLOWS.⁴**





PREFERRED BY PATIENTS

The majority of patients are satisfied with Easyhaler® and prefer it over their previous inhaler.¹⁻³ Patient satisfaction with their inhaler is associated with high treatment adherence and better clinical outcomes.⁴





PREFERRED BY PATIENTS

— PATIENTS OF ALL AGES ARE SATISFIED WITH EASYHALER

Patient satisfaction with an inhaler is related to improved treatment adherence and disease control.⁴ More than 90% of patients with asthma and COPD, from children to the elderly, are satisfied with Easyhaler.¹ In addition, most patients are satisfied with

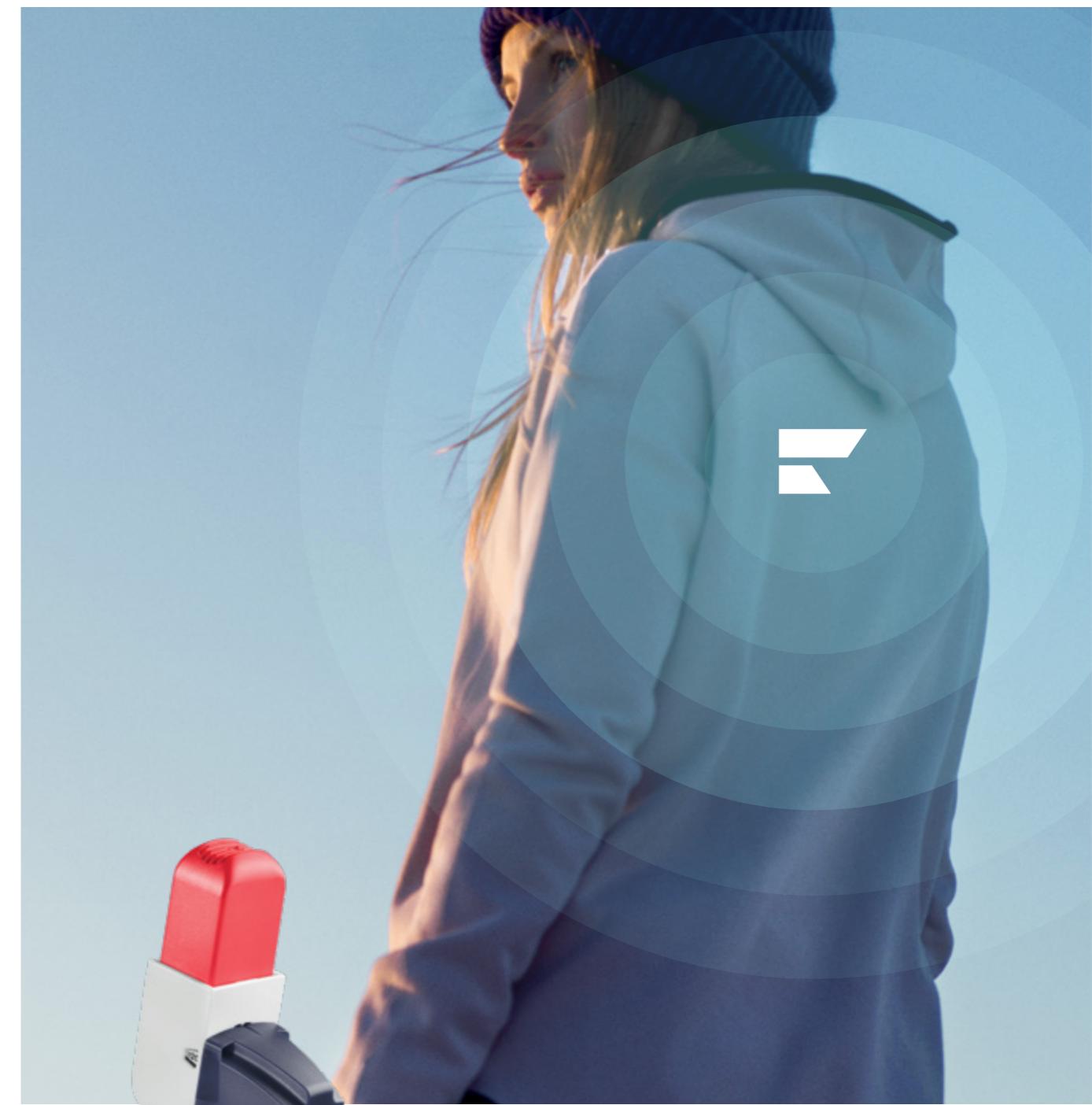
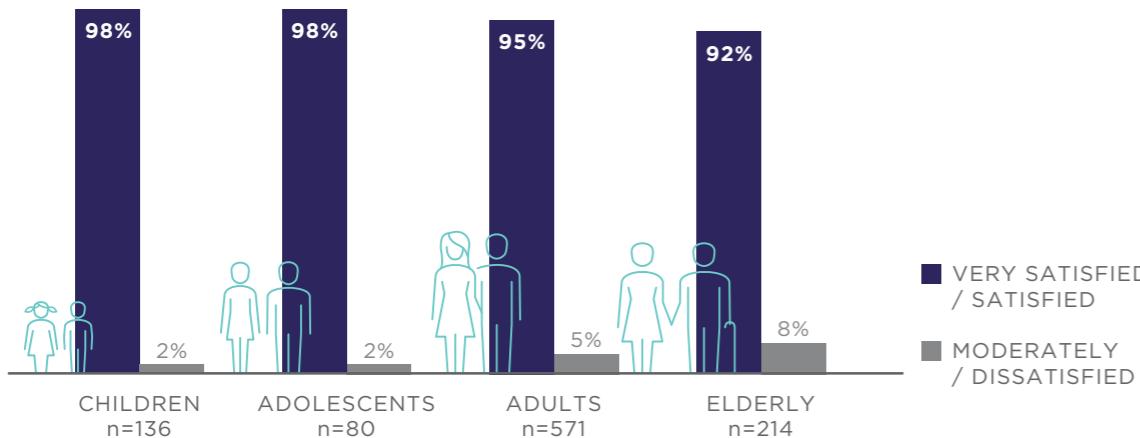
Easyhaler following a switch from an alternative inhaler and approximately three out of four patients prefer Easyhaler over their previous inhaler.^{2,3} Patients consider the Easyhaler device easy to learn and use, easy to keep clean, and effortless to carry.^{2,5}

14

15



MORE THAN 90% OF PATIENTS, FROM CHILDREN TO THE ELDERLY, ARE SATISFIED WITH EASYHALER.¹

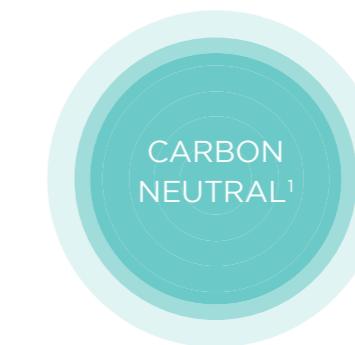


HIGH SATISFACTION IS ASSOCIATED WITH BETTER ADHERENCE AND CLINICAL OUTCOMES.⁴

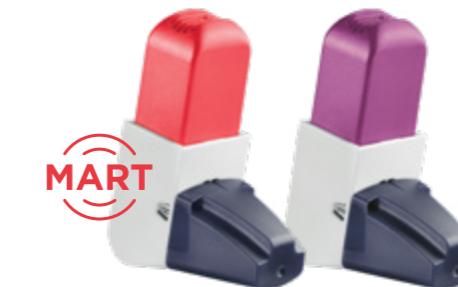


ENVIRONMENTALLY SUSTAINABLE

Easyhaler® is a carbon neutral product range enabling environmentally conscious decision-making in asthma and COPD care, for physicians and patients alike.^{1,2}



Carbon
Neutral
Product





ENVIRONMENTALLY SUSTAINABLE

— A CARBON NEUTRAL INHALER RANGE

A growing awareness of climate change is driving people and companies to pay more attention to cut carbon emissions. In 2021, Easyhaler became a carbon neutral inhaler range.¹ Easyhaler carbon neutrality is achieved by

minimising CO₂ emissions across the entire product life cycle and offsetting the remaining and currently unavoidable emissions through supporting programmes that remove the same amount of CO₂ that is emitted into the atmosphere.



Carbon
Neutral
Product

HOW EASYHALER BECAME CARBON NEUTRAL¹

BY MINIMISING EMISSIONS

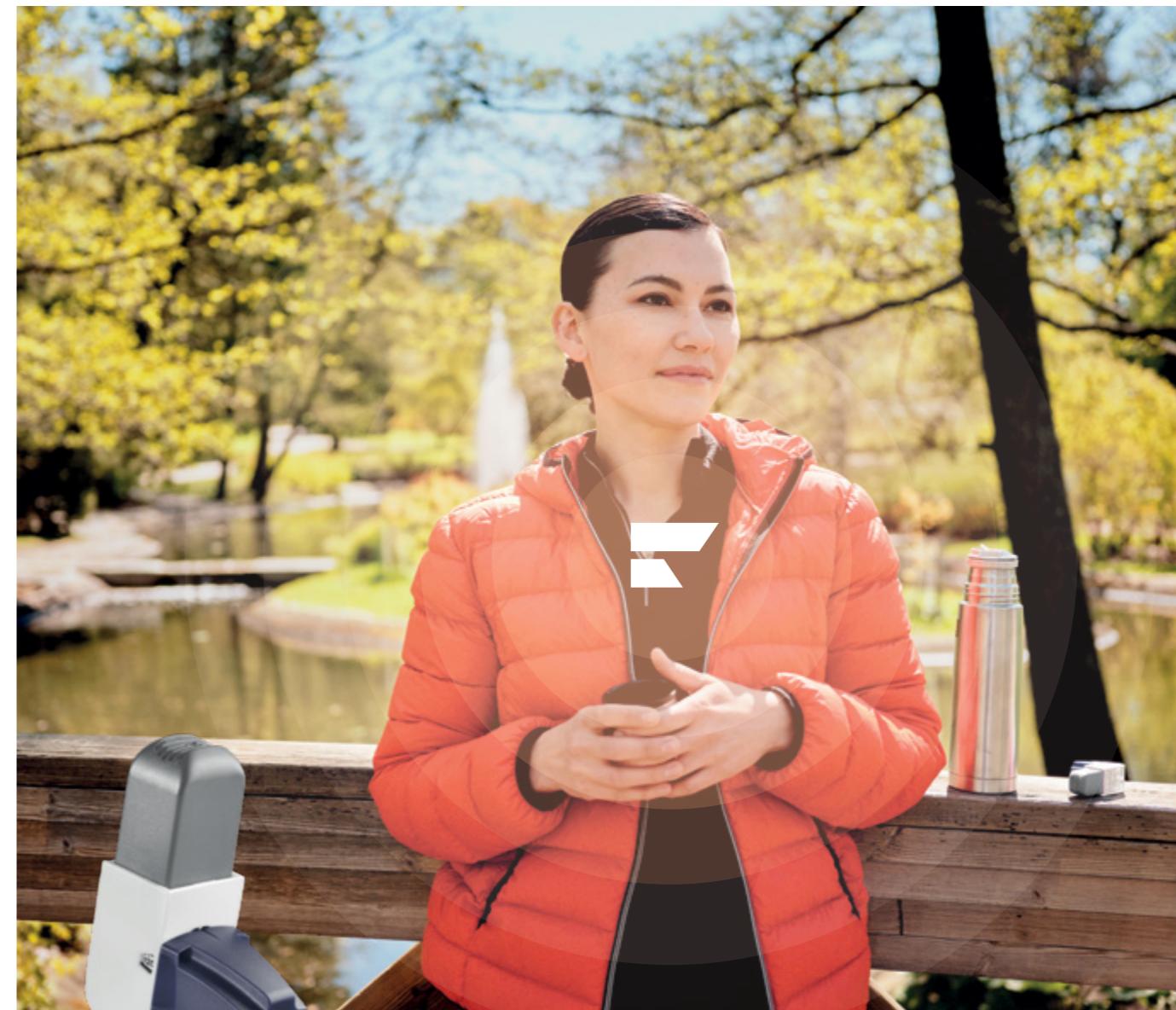


Carbon neutrality is achieved by **minimising CO₂ emissions** across the product supply chain and life cycle. As a result of the minimising efforts, Orion has managed to lower the average **carbon footprint of Easyhaler products by 11%** from 2019 to 2023.³

BY OFFSETTING THE REST



The remaining CO₂ emissions are offset by supporting the **Verified Carbon Standard (VCS)** projects, preventing **the same amount of CO₂** being emitted into the atmosphere.



DPIs ARE MORE CLIMATE FRIENDLY THAN HFC MDIs

Dry powder inhalers (DPIs) such as Easyhaler have a lower carbon footprint than pressurised metered dose inhalers (MDIs) which contain propellants with high global warming potential.^{4,5}



DPIs ARE
PROPELLANT-FREE INHALERS.⁴



THE CARBON FOOTPRINT OF DPIs IS
10-40 TIMES LOWER THAN THAT OF PMDIs.⁴

A SUSTAINABLE CHOICE FOR PATIENTS AND THE PLANET.

The Easyhaler® delivers sustainable asthma and COPD care. Combination therapies (ICS + LABA) are available in a dry powder inhaler (DPI) form. The active pharmaceutical ingredients have been studied extensively and proven effective and well-tolerated.¹⁻⁶

The climate impact associated with medications is becoming an increasingly important aspect to consider in the healthcare and pharmaceutical industries. In asthma therapy, the Global Initiative for Asthma (GINA) also recommends considering the environmental impact of inhalers as part of deciding which inhaler to choose for patients.⁷

Easyhaler is environmentally sustainable. To reduce impacts for the environment, the carbon footprint of Easyhaler products has been assessed and CO₂ emissions reduced across the entire product life cycle. The remaining CO₂ emissions of Easyhaler are offset to achieve carbon neutrality.⁸

20


EASY TO LEARN

ACCURATE AND CONSISTENT

PREFERRED BY PATIENTS

ENVIRONMENTALLY SUSTAINABLE

Easy to teach, learn and use.⁹⁻¹³

Generates accurate and consistent dose delivery — even with low inhalation flows.¹⁴⁻¹⁶

High patient satisfaction.^{9,11,18,19,20}

Carbon neutral inhaler — a sustainable choice for the climate.⁸



Carbon
Neutral
Product



EASYHALER
SUSTAINABILITY
VIDEO

21

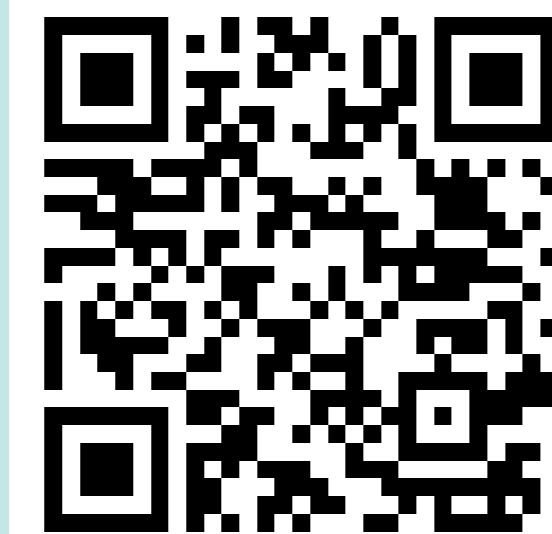


EASYHALER PRODUCT RANGE



**BUFOMIX
EASYHALER®**

**SALFLUMIX
EASYHALER®**



Scan the
QR code to
watch Easyhaler
in Action



SALFLUMIX EASYHALER®

PBS Information: Authority required (STREAMLINED).
Refer to PBS Schedule for full authority information.

Please review
product
information by
scanning the
QR code.



COMPOSITION:

SALFLUMIX EASYHALER 250/50

Salmeterol 50 µg (as xinafoate) and 250µg fluticasone propionate. Each delivered dose (the dose that leaves the mouthpiece) contains 48 µg salmeterol (as xinafoate) and 238 µg fluticasone propionate.

SALFLUMIX EASYHALER 500/50

Salmeterol 50 µg (as xinafoate) and 500µg fluticasone propionate. Each delivered dose (the dose that leaves the mouthpiece) contains 48 µg salmeterol (as xinafoate) and 476 µg fluticasone propionate¹.

INDICATION:

For the regular treatment of asthma, where the use of a combination product is appropriate. This may include:

Patients on effective maintenance doses of long acting beta-2 agonists and inhaled corticosteroids

Patients who are symptomatic on current inhaled corticosteroid therapy.

SALFLUMIX EASYHALER is not indicated for the initiation of bronchodilator therapy in COPD.

24 For the symptomatic treatment of patients with severe COPD (FEV1<50% predicted normal) and a history of repeated exacerbations who have significant symptoms despite regular beta-2 agonist bronchodilator therapy¹.

MINIMUM PRODUCT INFORMATION SALFLUMIX EASYHALER

SALFLUMIX EASYHALER (Fluticasone propionate / salmeterol xinafoate) **INDICATIONS** For the regular treatment of asthma, where the use of a combination product is appropriate. This may include: • Patients on effective maintenance doses of long-acting beta-2 agonists and inhaled corticosteroids • Patients who are symptomatic on current inhaled corticosteroid therapy. For the symptomatic treatment of patients with severe COPD (FEV1<50% predicted normal) and a history of repeated exacerbations who have significant symptoms despite regular beta-2 agonist bronchodilator therapy. SALFLUMIX EASYHALER is not indicated for the initiation of bronchodilator therapy in COPD. **CONTRAINDICATIONS** Hypersensitivity to the active substances or lactose monohydrate (which contains milk proteins). **PRECAUTIONS** Not for treatment of acute asthma symptoms. Patients should seek medical attention if symptoms are uncontrolled or worsen. Do not stop treatment abruptly. Sudden and progressive deterioration in control of asthma is potentially life threatening and the patient should be reviewed by a physician. Caution in patients with: active or quiescent pulmonary tuberculosis, severe cardiovascular disorders or heart rhythm abnormalities, have or have a history of diabetes mellitus, thyrotoxicosis, uncorrected hypokalaemia or predisposed to low levels of serum potassium, paradoxical bronchospasm. Systemic effects may occur, particularly at high doses prescribed for long periods, review patients regularly. Take care when transferring patients with impaired adrenal function from previous systemic steroid therapy. Prolonged treatment with high doses of inhaled steroids may be at risk of impaired adrenocortical function, consider additional systemic corticosteroid during periods of stress. Refer patients with blurred vision or other visual disturbances to an ophthalmologist. In COPD, be vigilant for the possible development of pneumonia. To minimize the risk of oropharyngeal candida infection, the patient should be instructed to rinse their mouth out with water after inhaling the maintenance dose. SALFLUMIX EASYHALER should not be used in children younger than 12 years. **INTERACTIONS** Avoid concomitant treatment with ritonavir, ketoconazole or other potent CYP3A4 inhibitors. Non-selective and selective beta-blockers should be avoided. **PREGNANCY** Category B3, balance benefits against risks. **ADVERSE EFFECTS** Candidiasis of the mouth and throat, pneumonia (in COPD patients), headache, palpitations, hoarseness/dysphonia, throat irritation, muscle cramps, arthralgia. **DOSAGE AND METHOD OF USE** SALFLUMIX EASYHALER is for inhalation only. The inhaler is inspiratory flow-driven, when the patient inhales through the mouthpiece, the substance will follow the inspired air into the airways. Patients should be advised to carefully read the instructions for use within the inhaler packaging. SALFLUMIX EASYHALER must be used regularly for optimum benefit, even when asymptomatic. **Asthma** The dose of fluticasone propionate should be titrated to the lowest dose at which effective control of symptoms is maintained. Adults and children over 12 years: One inhalation of 250 micrograms fluticasone propionate and 50 micrograms salmeterol twice daily, or one inhalation of 500 micrograms fluticasone propionate and 50 micrograms salmeterol twice daily. The recommended dose for initiation of maintenance therapy in moderate persistent asthma is 100/50 micrograms fluticasone propionate/salmeterol twice daily. Regular review of patients as treatment is stepped down is important. Paediatric patients: SALFLUMIX EASYHALER should not be used in children younger than 12 years **COPD** Adults: The recommended dose is one inhalation 500/50 micrograms twice daily, or one inhalation 250/50 micrograms twice daily may be a consideration in patients who are at a greater risk of inhaled corticosteroid adverse effects. Please review full Product Information available at www.orionpharma.com.au before prescribing - Refer to full PI (last updated August 2023).



BUFOMIX EASYHALER®

PBS Information: Authority required (STREAMLINED).
Refer to PBS Schedule for full authority information.

Please review
product
information by
scanning the
QR code.



COMPOSITION:

BUFOMIX EASYHALER 200/6

Budesonide 200 µg and formoterol (eformoterol) fumarate dihydrate 6 µg
Each delivered dose (the dose that leaves the mouthpiece) contains 160 µg budesonide and 4.5 µg formoterol.

BUFOMIX EASYHALER 400/12

Budesonide 400 µg and formoterol (eformoterol) fumarate dihydrate 12 µg
Each delivered dose (the dose that leaves the mouthpiece) contains 320 µg budesonide and 9 µg formoterol².

INDICATION:

Asthma

BUFOMIX EASYHALER is indicated in adults and adolescents (12 years and older), for the treatment of asthma, to achieve overall asthma control, including the relief of symptoms and the reduction of the risk of exacerbations.

Chronic obstructive pulmonary disease (COPD)

BUFOMIX EASYHALER is indicated for the symptomatic treatment of moderate to severe COPD (FEV1≤50% predicted normal) in adults with frequent symptoms despite long-acting bronchodilator use, and/or a history of recurrent exacerbations. BUFOFOMIX EASYHALER is not indicated for the initiation of bronchodilator therapy in COPD².

MINIMUM PRODUCT INFORMATION BUFOFOMIX EASYHALER

BUFOMIX EASYHALER (Budesonide Formoterol fumarate dihydrate). **INDICATIONS** BUFOFOMIX EASYHALER is indicated in adults and adolescents (12 years and older), for the treatment of asthma, to achieve overall asthma control, including the relief of symptoms and the reduction of the risk of exacerbations. BUFOFOMIX EASYHALER is indicated for the symptomatic treatment of moderate to severe chronic obstructive pulmonary disease (COPD) (FEV1≤50% predicted normal) in adults with frequent symptoms despite long-acting bronchodilator use, and/or a history of recurrent exacerbations. BUFOFOMIX EASYHALER is not indicated for the initiation of bronchodilator therapy in COPD. **CONTRAINDICATIONS** Hypersensitivity to budesonide, formoterol or lactose. **PRECAUTIONS** The patient must be shown how to use BUFOFOMIX EASYHALER correctly. Treatment must be regular and the use of the product must not be abruptly terminated. Patients should be advised to have rescue inhaler available at all times. Systemic effects (such as depression of the HPA axis, growth retardation in children and adolescents, reduction of bone density, visual disturbance) may occur with inhaled corticosteroid use. BUFOFOMIX EASYHALER should be administered with caution in patients with hyperthyroidism, respiratory infection, diabetes mellitus, untreated hypokalaemia, severe hypertension, aneurysm or other severe cardiovascular disorders such as ischaemic heart disease, tachyarrhythmias or severe heart failure. Caution should be observed when treating patients with prolongation of the QTc-interval. To minimize the risk of oropharyngeal candida infection, the patient should be instructed to rinse their mouth out with water after inhaling the maintenance dose. **INTERACTIONS** Potent CYP3A4 inhibitors may increase systemic exposure to budesonide and concomitant use should be avoided. BUFOFOMIX EASYHALER should not be given together with beta receptor blocking agents. Concomitant treatment with quinidine, disopyramide, procainamide, phenothiazines, antihistamines (terfenadine), monoamine oxidase inhibitors and tricyclic antidepressants can prolong the QTc interval and increase the risk of ventricular arrhythmias. Hypokalaemia may result from 2-agonist therapy and may be potentiated by concomitant treatment with xanthine derivatives, mineralocorticosteroids, and diuretics. **PREGNANCY** Category B3 During pregnancy, BUFOFOMIX EASYHALER should only be used when the benefits outweigh the potential risks. **ADVERSE EFFECTS** Oropharyngeal candidiasis, palpitations, tremor, hoarseness, pneumonia (in COPD patients), headache, coughing, mild throat irritation. **DOSAGE AND METHOD OF USE** BUFOFOMIX EASYHALER is for inhalation only. The inhaler is inspiratory flow-driven, when the patient inhales through the mouthpiece, the substance will follow the inspired air into the airways. Patients should be advised to carefully read the instructions for use within the inhaler packaging. **BUFOFOMIX EASYHALER anti-inflammatory reliever therapy (patients with mild disease)** Adults and adolescents (12 years and older) should take 1 inhalation of BUFOFOMIX EASYHALER 200/6 as needed in response to symptoms. If symptoms persist after a few minutes, an additional inhalation should be taken. No more than 6 inhalations should be taken on any single occasion. **BUFOFOMIX EASYHALER anti-inflammatory plus maintenance therapy (MART)** Adults and adolescents (12 years and older) should take 1 inhalation BUFOFOMIX EASYHALER 200/6 as needed in response to symptoms to control asthma. If symptoms persist after a few minutes, another inhalation should be taken. No more than 6 inhalations should be taken on any single occasion. Patients also take the recommended maintenance dose of BUFOFOMIX EASYHALER 200/6, which is two inhalations per day, given as either one inhalation in the morning and evening or as two inhalations in either the morning or evening. For some patients, a maintenance dose of BUFOFOMIX EASYHALER 200/6 two inhalations twice daily may be appropriate. For both Reliever and Reliever plus Maintenance, a total daily dose of more than 8 inhalations is normally not needed, however a total daily dose of up to 12 inhalations can be used temporarily. Patients should seek medical advice if additional inhalations are required. **BUFOFOMIX EASYHALER maintenance therapy (fixed dose)** Adults and adolescents (12 years and older) 1-2 inhalations of BUFOFOMIX EASYHALER 200/6 twice daily. Adults (18 years and over) who require a higher daily maintenance dose (1600/48) 2 inhalations of BUFOFOMIX EASYHALER 400/12 twice daily. When control of asthma has been achieved, the dose can be decreased to 1 inhalation twice daily. **COPD** 2 inhalations of BUFOFOMIX EASYHALER 200/6 twice daily or BUFOFOMIX EASYHALER 400/12 1 inhalation of BUFOFOMIX EASYHALER 400/12 twice daily. Please review full Product Information available at www.orionpharma.com.au before prescribing. - Refer to full PI (last updated July 2023).

REFERENCES**PAGES 2-3: BENEFITS FOR PATIENTS AND PHYSICIANS**

1. Salflumix Easyhaler Product Information, August 18 2023.
2. Bufomix Easyhaler Product Information, July 17 2023.
3. Salbutamol Easyhaler 100 mcg and 200 mcg. SmPC. Orion Pharma.*
4. Beclometasone Easyhaler 100, 200, and 400 mcg. SmPC. Orion Pharma.*
5. Formoterol Easyhaler 12 mcg. SmPC. Orion Pharma.*
6. Budesonide Easyhaler 100, 200, and 400 mcg. SmPC. Orion Pharma.*
7. Haikarainen J, Selroos O, Löytänä T, Metsärinne S, Happonen A, Ryttilä P. Budesonide/Formoterol Easyhaler®: performance under simulated real-life conditions. *Pulm Ther* 2017;3:125-38.
8. Palander A, Mattila T, Karhu M, Muttonen E. In vitro comparison of three salbutamol-containing multidose dry powder inhalers. *Clin Drug Invest* 2000;20(1):25-33.
9. Haikarainen J, Ryttilä P, Roos S, Metsärinne S, Happonen A. Dose uniformity of budesonide Easyhaler® under simulated real-life conditions and with low inspiration flow rates. *Chron Respir Dis* 2018;15(3):265-71.
10. Tamási L, Szilasi M, Gálffy G. Clinical Effectiveness of Budesonide/Formoterol Fumarate Easyhaler® for Patients with Poorly Controlled Obstructive Airway Disease: a Real-World Study of Patient- Reported Outcomes. *Adv Ther*. 2018;35(8):1140-52.
11. Gálffy G, Szilasi M, Tamási L. Effectiveness and Patient Satisfaction with Budesonide/Formoterol Easyhaler® Among Patients with Asthma or COPD Switching from Previous Treatment: a Real-World Study of Patient-Reported Outcomes. *Pulm Ther*. 2019;5(2):165-77.
12. Vinge I, Syk J, Xanthopoulos A, Laßmann H, Vahteristo M, Sairanen U, Lähelmä S, Hennig R, Müller M. A non-interventional switch study in adult patients with asthma or COPD on clinical effectiveness of salmeterol/fluticasone Easyhaler® in routine clinical practice. *Ther Adv Respir Dis*. 2021;15:17534666211027787.
13. Gálffy G, Mezei G, Németh G, Tamási L, Müller V, Selroos O, Orosz M. Inhaler competence and patient satisfaction with Easyhaler®: results of two real-life multicentre studies in asthma and COPD. *Drugs R D*. 2013;13(3):215-22.
14. Syk J, Vinge I, Sörberg M, Vahteristo M, Ryttilä P. A Multicenter, Observational, Prospective Study of the Effectiveness of Switching from Budesonide/Formoterol Turbuhaler® to Budesonide/Formoterol Easyhaler®. *Adv Ther*. 2019;36(7):1756-69.
15. Carbon Neutral Product Certificate for Easyhaler product range. Available on request from Orion Pharma.

PAGES 4-7: EASY TO LEARN

1. Tamási L, Szilasi M, Gálffy G. Clinical effectiveness of budesonide/formoterol fumarate Easyhaler® for patients with poorly controlled obstructive airway disease: a real-world study of patient-reported outcomes. *Adv Ther*. 2018;35(8):1140-52.
2. Gálffy G, Mezei G, Németh G, Tamási L, Müller V, Selroos O, Orosz M. Inhaler competence and patient satisfaction with Easyhaler®: results of two real-life multicentre studies in asthma and COPD. *Drugs in R&D*. 2013;13(3):215-22.
3. Syk J, Vinge I, Sörberg M, Vahteristo M, Ryttilä P. A multicenter, observational, prospective study of the effectiveness of switching from budesonide/formoterol Turbuhaler® to budesonide/formoterol Easyhaler®. *Adv Ther*. 2019;36(7):1756-69.
4. Gálffy G, Szilasi M, Tamási L. Effectiveness and patient satisfaction with budesonide/formoterol Easyhaler® among patients with asthma or COPD switching from previous treatment: a real-world study of patient-reported outcomes. *Pulm Ther*. 2019;5(2):165-177.
5. Ribö P, Molina J, Calle M, Maiz L, Campo C, Ryttilä P, Plaza V, Valero A. Prevalence of modifiable factors limiting treatment efficacy of poorly controlled asthma patients: EFIMERA observational study. *NPJ Prim Care Respir Med*. 2020;30(1):33.
6. Levy ML, Carroll W, Izquierdo Alonso JL, Keller C, Lavorini F, Lehtimäki L. Understanding dry powder inhalers: key technical and patient preference attributes. *Adv Ther*. 2019;36(10):2547-57.
7. Hantulik P, Wittig K, Henschel Y, Ochse J, Vahteristo M, Ryttilä P. Usage and usability of one dry powder inhaler compared to other inhalers at therapy start: an open, non-interventional observational study in Poland and Germany. *Pneumonol Alergol Pol* 2015;83(5):365-77.

PAGES 8-11: ACCURATE AND CONSISTENT

1. Malmberg LP, Pelkonen AS, Vartiainen V, Vahteristo M, Lähelmä S, Jögi R. Patients with asthma or chronic obstructive pulmonary disease (COPD) can generate sufficient inspiratory flows via Easyhaler® dry powder inhaler: a pooled analysis of two randomized controlled trials. *J Thorac Dis*. 2021;13(2):621-631.
2. Kainu A, Vartiainen VA, Mazur W, Hisinger-Mölkänen H, Lavorini F, Janson C, Andersson M. Successful Use of Easyhaler® Dry Powder Inhaler in Patients with Chronic Obstructive Pulmonary Disease: Analysis of Peak Inspiratory Flow from Three Clinical Trials. *Pulm Ther*. 2024 Jan 3. doi: 10.1007/s41030-023-00246-8. Epub ahead of print.
3. Palander A, Mattila T, Karhu M, Muttonen E. In vitro comparison of three salbutamol containing multidose dry powder inhalers. *Clin Drug Invest* 2000;20(1):25-33.
4. Haikarainen J, Selroos O, Löytänä T, Metsärinne S, Happonen A, Ryttilä P. Budesonide/Formoterol Easyhaler®: performance under simulated real-life conditions. *Pulm Ther* 2017;3:125-38.
5. Levy ML, Carroll W, Izquierdo Alonso JL, Keller C, Lavorini F, Lehtimäki L. Understanding Dry Powder Inhalers: Key Technical and Patient Preference Attributes. *Adv Ther*. 2019;36(10):2547-57.
6. Ghosh S, Ohar J, Drummond B. Peak inspiratory flow rate in chronic obstructive pulmonary disease: implications for dry powder inhalers. *J Aerosol Med Pulm Drug Deliv* 2017;30(6):381-87.
7. Haidl P, Heindl S, Siemon K, Bernacka M, Cloes RM. Inhalation device requirements for patients' inhalation maneuvers. *Respir Med* 2016;118:65-75.
8. Haikarainen J, Ryttilä P, Roos S, Metsärinne S, Happonen A. Dose uniformity of budesonide Easyhaler® under simulated real-life conditions and with low inspiration flow rates. *Chron Respir Dis* 2018;15(3):265-71.

PAGES 12-15: PREFERRED BY PATIENTS

1. Gálffy G, Mezei G, Németh G, Tamási L, Müller V, Selroos O, Orosz M. Inhaler competence and patient satisfaction with Easyhaler®: results of two real-life multicentre studies in asthma and COPD. *Drugs R D*. 2013;13(3):215-222.
2. Tamási L, Szilasi M, Gálffy G. Clinical Effectiveness of Budesonide/Formoterol Fumarate Easyhaler® for Patients with Poorly Controlled Obstructive Airway Disease: a Real-World Study of Patient-Reported Outcomes. *Adv Ther*. 2018;35(8):1140-1152.
3. Vinge I, Syk J, Xanthopoulos A, Laßmann H, Vahteristo M, Sairanen U, Lähelmä S, Hennig R, Müller M. A non-interventional switch study in adult patients with asthma or COPD on clinical effectiveness of salmeterol/fluticasone Easyhaler® in routine clinical practice. *Ther Adv Respir Dis*. 2021;15:17534666211027787.
4. Plaza V, Giner J, Calle M, Ryttilä P, Campo C, Ribö P, Valero A. Impact of patient satisfaction with his or her inhaler on adherence and asthma control. *Allergy Asthma Proc* 2018;39(6):437-444.
5. Pirożyński M, Hantulik P, Almgren-Rachtan A, Chudek J. Evaluation of the Efficiency of Single-Inhaler Combination Therapy with Budesonide/Formoterol Fumarate in Patients with Bronchial Asthma in Daily Clinical Practice. *Adv Ther*. 2017;34(12):2648-2660.

PAGES 16-19: SUSTAINABLE CHOICE

1. Carbon Neutral Product Certificate for Easyhaler product range. Available on request from Orion Pharma.
2. Carbon life cycle assessment report for Orion Corporation, Orion Pharma A study of 6 Easyhaler varieties. Executive summary. Carbon Footprint Ltd 2023. Available at: Orion.fi.
3. Inget M, Hisinger-Mölkänen H, Howard M, Lähelmä S, Paronen N. Cradle-to-Grave Emission Reduction for Easyhaler Dry Powder Inhaler Product Portfolio. *Pulm Ther*. 2023 Dec;9(4):527-533.
4. Ohnishi K, Tope H, Zhang J. Montreal Protocol on Substances That Deplete the Ozone Layer. Report of the Medical and Chemical Technical Options Committee. United Nations Environment Programme: 2022.
5. Wilkinson AJK, Braggins R, Steinbach I, Smith J. Costs of switching to low global warming potential inhalers. An economic and carbon footprint analysis of NHS prescription data in England. *BMJ Open*. 2019;9(10):e028763.

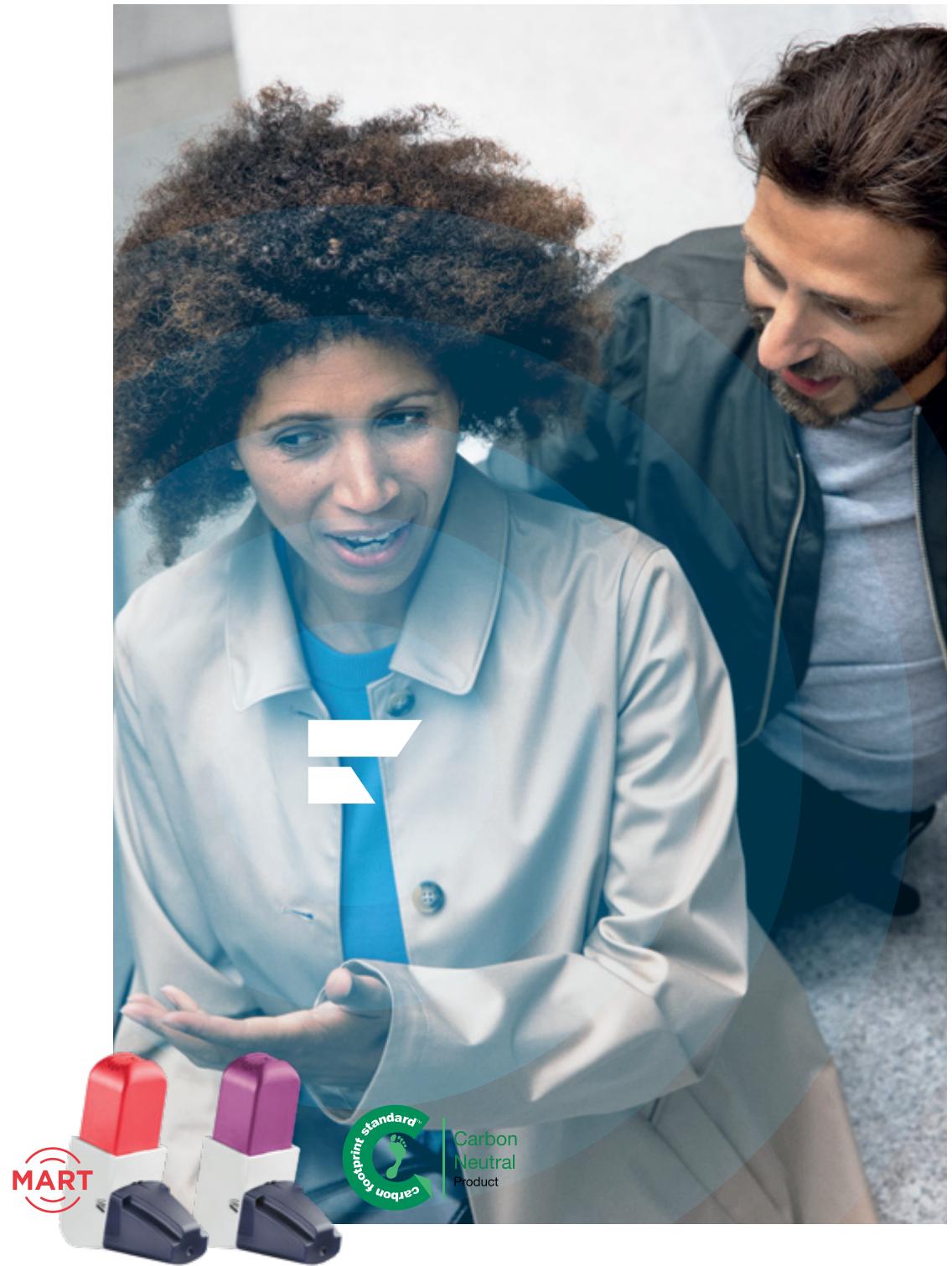
PAGE 20-21: A SUSTAINABLE CHOICE FOR PATIENTS AND THE PLANET

1. Salflumix Easyhaler Product Information, August 18 2023.
2. Bufomix Easyhaler Product Information, July 17 2023.
3. Salbutamol Easyhaler 100 mcg and 200 mcg. SmPC. Orion Pharma.
4. Beclometasone Easyhaler 100, 200, and 400 mcg. SmPC. Orion Pharma.*
5. Formoterol Easyhaler 12 mcg. SmPC. Orion Pharma.*
6. Budesonide Easyhaler 100, 200, and 400 mcg. SmPC. Orion Pharma.*
7. The Global Initiative for Asthma (GINA). Global strategy for asthma management and prevention 2023. Available at: ginasthma.org
8. Carbon Neutral Product Certificate for Easyhaler product range. Available on request from Orion Pharma.
9. Tamási L, Szilasi M, Gálffy G. Clinical Effectiveness of Budesonide/Formoterol Fumarate Easyhaler® for Patients with Poorly Controlled Obstructive Airway Disease: a Real-World Study of Patient Reported Outcomes *Adv Ther*. 2018;35(8):1140-52.
10. Gálffy G, Szilasi M, Tamási L. Effectiveness and Patient Satisfaction with Budesonide/Formoterol Easyhaler® Among Patients with Asthma or COPD Switching from Previous Treatment: a Real World Study of Patient-Reported Outcomes. *Pulm Ther*. 2019;5(2):165-77.
11. Gálffy G, Mezei G, Németh G, Tamási L, Müller V, Selroos O, Orosz M. Inhaler competence and patient satisfaction with Easyhaler®: results of two real-life multicentre studies in asthma and COPD. *Drugs R D*. 2013;13(3):215-22. O. Gálffy G, et al. *Drugs in R&D*. 2013;13(3):215-22.
12. Syk J, Vinge I, Sörberg M, Vahteristo M, Ryttilä P. A Multicenter, Observational, Prospective Study of the Effectiveness of Switching from Budesonide/Formoterol Turbuhaler® to Budesonide/Formoterol Easyhaler®. *Adv Ther*. 2019;36(7):1756-69. 15. Carbon Neutra
13. Hantulik P, et al. *Pneumonol Alergol Pol* 2015;83(5):365-77
14. Haikarainen J, Selroos O, Löytänä T, Metsärinne S, Happonen A, Ryttilä P. Budesonide/Formoterol Easyhaler®: performance under simulated real-life conditions. *Pulm Ther* 2017;3:125-38.
15. Palander A, Mattila T, Karhu M, Muttonen E. In vitro comparison of three salbutamol-containing multidose dry powder inhalers. *Clin Drug Invest* 2000;20(1):25-33.
16. Haikarainen J, Ryttilä P, Roos S, Metsärinne S, Happonen A. Dose uniformity of budesonide Easyhaler® under simulated real-life conditions and with low inspiration flow rates. *Chron Respir Dis* 2018;15(3):265-71.
18. Vinge I, Syk J, Xanthopoulos A, Laßmann H, Vahteristo M, Sairanen U, Lähelmä S, Hennig R, Müller M. A non-interventional switch study in adult patients with asthma or COPD on clinical effectiveness of salmeterol/fluticasone Easyhaler® in routine clinical practice. *Ther Adv Respir Dis*. 2021;15:17534666211027787.
19. Valero A, et al. *Expert Rev Respir Med*. 2019;13:133-138.
20. Alvarez-Gutiérrez FJ, et al. *Patient Prefer Adherence*. 2021;15:349-58.

PAGES 22-25: EASYHALER PRODUCT RANGE

1. Salflumix Easyhaler Product Information, August 18 2023.
2. Bufomix Easyhaler Product Information, July 17 2023.

EASYHALER®



Orion Pharma, Level 24, Tower 3, 300 Barangaroo Ave Sydney NSW 2000 Australia
PH: +61 2 8067 8704 www.orionpharma.com.au
EMAIL: contactusaustralia@orionpharma.com

For insight article,
visit wehale.life

For medical information or to report an adverse event
PH: 1800 861 913 or
EMAIL: medical.ANZ@pharmalex.com

ORION
PHARMA