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COPD Foundation's Medical And Scientific Advisory Committee (MASAC) and Clinical Advisory Committee (CAC) Resolution

The COPD Foundation is the national not for profit organization solely dedicated to representing individuals with COPD in the United States. The COPD Foundation's Medical and Scientific Advisory Council (MASAC) and Clinical Advisory Committee (CAC) members include leading COPD clinicians and researchers in the world.

Whereas the community of individuals with Chronic Obstructive Pulmonary Disease (COPD) depend on respiratory phramacologics for the treatment of their destructive lung disease, and

Whereas physician choice and patient choice and access to appropriate medical care are rights of patients and central to patient-physician interaction, and

Whereas similar respiratory pharmacologics have been determined by the U.S. Food and Drug Administration to be distinct from one another, even if they primarily contain a similar active ingredients in the same class of respiratory pharmacologics and

Whereas it is our accumulated clinical experience that there are individuals with COPD with adverse experiences caused by an alternative product in the same class of respiratory pharmacologics who require a different product or who prefer one of the available products over others after long experience and achievement of disease stabilization with a particular product, and

Whereas it has come to our attention that some payers and employers have decided to provide only a single product in the same class of respiratory pharmacologics for the treatment of COPD and others have made it substantially difficult to continue on a particular preferred product by offering economic incentives to the payer who implements restrictions, and

Whereas there is considerable disruption of the clinical care of individuals who are forced to switch product as well as considerable emotional distress that denies patients access to potentially effective treatment,

the COPD Foundation's MASAC and CAC hereby resolves that it is <u>unacceptable</u> to limit access of respiratory pharmacologics in any way and especially to a single product in that class when several options are available, or require that individuals provide documentation of failure or adverse experience with a particular product in order to receive or continue receiving their drug of choice.

David M. Mannino, MD	Neil Schachter, MD	John W. Walsh
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