



Did You Know?

Over half of all cystic fibrosis (CF) patients are age 18 and over¹

Approximately 50% of patients are not adherent to their treatment regimen²

Patients spend approximately 2–3 hrs each day administering inhaled medications to manage their CF³

Adherence rates contribute to overall lung function and pulmonary exacerbations^{2,4}

1. Cystic Fibrosis Foundation. Patient Registry: 2020 Annual Data Report. Accessed December 15, 2021. <https://www.cff.org/sites/default/files/2021-11/Patient-Registry-Annual-Data-Report.pdf>
2. Eakin MN, Riekert KA. The impact of medication adherence on lung health outcomes in cystic fibrosis. *Curr Opin Pulm Med.* 2013;19(6):687-691.
3. Rymer P, Scott I. Cystic Fibrosis Insight Survey-Report on the 2017 and 2018 Surveys. Cystic Fibrosis Trust; 2018.
4. Raymond K, George C. Partnerships for sustaining daily care: understanding patient/clinician communication: a comprehensive pilot project report. <https://www.cff.org/For-Caregivers/For-Clinicians/Partnerships-for-Sustaining-Daily-Care/Understanding-Patient-Clinician-Communication.pdf>. Published June 2016. Accessed December 5, 2019

Bronchitol[®]

(mannitol) inhalation powder

Indication

BRONCHITOL (mannitol) inhalation powder is a sugar alcohol indicated as add-on maintenance therapy to improve pulmonary function in adult patients 18 years of age and older with cystic fibrosis. Use BRONCHITOL only in adults who have passed the BRONCHITOL Tolerance Test.

Important Safety Information

BRONCHITOL is contraindicated in patients with hypersensitivity to mannitol or to any of the capsule components. BRONCHITOL is contraindicated in patients who fail to pass the BRONCHITOL Tolerance Test (BTT).

BRONCHITOL can cause bronchospasm, which can be severe in susceptible patients. Because of the risk of bronchospasm, prior to prescribing BRONCHITOL, patients must pass the BRONCHITOL Tolerance Test (BTT). The BTT must be administered under the supervision of a healthcare practitioner who can treat severe bronchospasm.

Patients who pass the BRONCHITOL tolerance test (BTT) may experience bronchospasm with add-on maintenance therapy with BRONCHITOL. Patients should premedicate with an inhaled short-acting bronchodilator prior to each administration of BRONCHITOL. If bronchospasm occurs, immediately discontinue BRONCHITOL and treat bronchospasm with an inhaled short-acting bronchodilator.

Hemoptysis can occur with BRONCHITOL use. Monitor patients with history of episodes of hemoptysis. If hemoptysis occurs, discontinue use of BRONCHITOL.

Most common adverse reactions ($\geq 3\%$) include cough, hemoptysis, oropharyngeal pain, vomiting, bacteria sputum identified, pyrexia, and arthralgia.

Please see Full Prescribing Information on www.Bronchitol.com



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Bronchitol[®]

(mannitol) inhalation powder

A mucoactive agent*
that fits into patients' lives



*The precise mechanism of action of BRONCHITOL in improving pulmonary function in cystic fibrosis patients is unknown. BRONCHITOL is not intended to be used as a rescue medication. Inhaler and blister pack are not actual size and are for representation only. Use an inhaled bronchodilator 5–15 minutes before taking BRONCHITOL.

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BRONCHITOL® (mannitol) inhalation powder may be appropriate for these potential patients*



Justin* 19-year-old college student



Diagnosed with cystic fibrosis (CF) from childhood, Justin has previously been fairly adherent to his CF care plan. He is interested in exploring other treatment options.

Medical history

- BMI: 22.3
- FEV₁: 80% of predicted

Current CF care plan

- Prescribed 6 medications, including an inhaled antibiotic, dornase alfa, PERT, and CFTR modulator
- Spends approximately 2 hours daily administering medications

Current lifestyle

- Has a tendency to be rushed in the morning before class
- Open to other treatment options

Lauren* 25-year old graduate student



Diagnosed with CF from childhood, Lauren is a 25-year-old graduate student who recently accepted a job where she works from home full-time. With classes and her new job, Lauren is still getting used to her new routine. She is open to exploring treatment options.

Medical history

- BMI: 23
- FEV₁: 70% of predicted

Current CF care plan

- Prescribed 7 medications
- Spends approximately 3 hours daily administering medications

Current lifestyle

- Lauren works from home full-time during the day, and takes graduate school classes at night
- Open to other treatment options

Meghan* 35-year-old mom



Meghan has effectively managed her CF throughout her life. Recently, she has had less time to manage her CF due to her children's increasingly busy schedules. She is exploring other treatment options that may better fit her schedule.

Medical history

- BMI: 20.6
- FEV₁: 75% of predicted

Current CF care plan

- Prescribed 7 medications
- Spends approximately 1.5 hours daily administering medications

Current lifestyle

- Spends most of the day out of the house with her children
- Open to trying treatments that can be taken in the morning and evening

Michael* 42-year old professional



Michael is 42 years old and has been managing his CF independently for over 20 years but was recently promoted at work. His new job has opened an exciting new chapter for him, but comes with additional responsibilities. He is open to exploring treatment options.

Medical history

- BMI: 21
- FEV₁: 75% of predicted

Current CF care plan

- Prescribed 6 medications
- Spends approximately 2 hours daily administering medications

Current lifestyle

- Michael works full-time in an office
- Open to other treatment options

Simon* 20-year old college student



Simon was diagnosed with CF at birth. He is 20 years old and recently started a part-time job while attending college full-time. He also recently moved out of his parents' home and is managing his CF on his own for the first time. He is open to exploring treatment options.

Medical history

- BMI: 20
- FEV₁: 80% of predicted

Current CF care plan

- Prescribed 6 medications
- Spends approximately 2 hours daily administering medications

Current lifestyle

- Simon is a full-time college student with a part-time job. Most of his days are spent on campus
- Open to other treatment options

PERT=pancreatic enzyme replacement therapy. CFTR=cystic fibrosis transmembrane conductance regulator *Not an actual patient. Patient symptoms will vary; individual evaluation should be done to determine best the course of therapy.

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