

Table 1.0. Standardizing Exacerbation Outcomes in Clinical Studies of COPD

Endpoint ^a	Definition	Measurement Approach	
		Medically-Treated Events (MTEs)	Symptom-Defined Events:
Frequency Event rate	<ul style="list-style-type: none"> – Event rate: per person per year – Event definition: acute sustained symptomatic worsening of COPD; treated with antibiotics, steroids, in hospital, or self-treated at home 	Number of health care resource utilization (HCRU) events: <ul style="list-style-type: none"> – Clinic or urgent care visit for an acute sustained symptomatic worsening of COPD, treated with antibiotics and/or steroids – Hospitalization for an acute sustained symptomatic worsening of COPD EXACT score changes may be used to document change in symptoms associated with HCRU events.	Number of symptom-defined events: <ul style="list-style-type: none"> – Acute, sustained symptomatic worsening of COPD, defined as an increase in EXACT score ≥ 9 points for 3 days or ≥ 12 points for 2 days, above Baseline Reported: accompanied by clinic or urgent care visit with antibiotic and/or steroid treatment or hospitalization Unreported ^b : no associated visit or hospitalization; self-treated at home
Time to first event Time to subsequent (next) event	<ul style="list-style-type: none"> – Days from initiation of treatment/placebo to first event – Days from recovery to subsequent (next) event 	First HCRU Event: <ul style="list-style-type: none"> – Days to Day 1, clinic or urgent care visit – Days to Day 1, hospitalization Subsequent HCRU event: <ul style="list-style-type: none"> – Days from end of treatment for first HCRU event to Day 1 of next HCRU event 	First symptom-defined event: <ul style="list-style-type: none"> – Days to Day 1 of sustained increase in EXACT score exceeding event threshold Subsequent symptom-defined event: <ul style="list-style-type: none"> – Days from Recovery from first symptom-defined event to Day 1 of next symptom-defined event
Proportion of patients with ≥ 1 event	<ul style="list-style-type: none"> – % patients with ≥ 1 event 	% with ≥ 1 HCRU event: <ul style="list-style-type: none"> – % with ≥ 1 clinic or urgent care visit – % with ≥ 1 hospitalization 	<ul style="list-style-type: none"> – % with ≥ 1 symptom-defined event: – % with ≥ 1 unreported symptom-defined event
Severity	<ul style="list-style-type: none"> – Degree or magnitude of the event(s) 	Type of treatment: <ul style="list-style-type: none"> – Moderate: antibiotics or steroids – Severe: hospitalization Symptom severity: <ul style="list-style-type: none"> – Maximum EXACT score during the HCRU event – Change in EXACT score, baseline to HCRU Day 1 – Mean EXACT score during treatment; area under the curve (AUC) 	Unreported, symptom-defined events: <ul style="list-style-type: none"> – Mild: self-treated at home^b Symptom severity: <ul style="list-style-type: none"> – Maximum EXACT score during the event – Change in EXACT score, baseline to event Day 1 – Mean EXACT score during the event; AUC
Duration	<ul style="list-style-type: none"> – Length of the event(s) 	Duration of treatment: <ul style="list-style-type: none"> – Days of treatment with antibiotics or steroids – Days of hospitalization 	Duration of symptoms: <ul style="list-style-type: none"> – Days from symptom onset to symptom recovery – Recovery: improvement in EXACT score ≥ 9 points from the maximum value, sustained for ≥ 7 days

^aConsistent with the FDA Draft COPD Guidance, if 1 of these endpoints is chosen as the primary efficacy endpoint, the others also should be assessed to ensure that another exacerbation outcome has not worsened. ^{1, pp.8}

^bCharacterized as "mild" in EMA COPD Guideline.²

¹ Food and Drug Administration. Draft guidance for industry on chronic obstructive pulmonary disease: developing drugs for treatment. Silver Spring, MD: Center for Drug Evaluation and Research (CDER). 2007; <http://www.fda.gov/downloads/Drugs/GuidanceComplianceRegulatoryInformation/Guidances/ucm071575.pdf>.

² European Medicines Agency, Respiratory Drafting Group. Guideline on clinical investigation of medicinal products in the treatment of chronic obstructive pulmonary disease (COPD). EMA/CHMP/483572/2012. London: European Medicines Agency. 2012; http://www.ema.europa.eu/docs/en_GB/document_library/Scientific_guideline/2012/08/WC500130880.pdf.