AIRSUPRA®
(albuterol 90 mcg/budesonide 80 mcg)
Inhalation Aerosol

# Shifting the Asthma Care Paradigm: Clinical Evidence for Anti-Inflammatory Rescue

AIRSUPRA is a combination of albuterol, a beta$_2$-adrenergic agonist and budesonide, a corticosteroid, indicated for the as-needed treatment or prevention of bronchoconstriction and to reduce the risk of exacerbations in patients with asthma 18 years of age and older.

## Date

**March 10, 2026**

## Time

06:00 PM – 08:00 PM Eastern Standard Time

## Location

**Gibraltar Restaurant**
488 Royer Drive
Lancaster, PA 17601

## Presenter

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## RSVP

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## IMPORTANT SAFETY INFORMATION for AIRSUPRA® (albuterol/budesonide) Inhalation Aerosol

- **Contraindications:** Hypersensitivity to albuterol, budesonide, or to any of the excipients
- **Deterioration of Asthma:** Asthma may deteriorate acutely over a period of hours or chronically over several days or longer. If the patient continues to experience symptoms after using AIRSUPRA or requires more doses of AIRSUPRA than usual, it may be a marker of destabilization of asthma and requires evaluation of the patient and their treatment regimen

**Please see additional Important Safety Information on back and see accompanying full Prescribing Information, including Patient Information.**

## IMPORTANT SAFETY INFORMATION for AIRSUPRA® (albuterol/budesonide) Inhalation Aerosol (CONT'D)

- **Paradoxical Bronchospasm:** AIRSUPRA can produce paradoxical bronchospasm, which may be life threatening. Discontinue AIRSUPRA immediately and institute alternative therapy if paradoxical bronchospasm occurs. It should be recognized that paradoxical bronchospasm, when associated with inhaled formulations, frequently occurs with the first use of a new canister
- **Cardiovascular Effects:** AIRSUPRA, like other drugs containing beta$_2$-adrenergic agonists, can produce clinically significant cardiovascular effects in some patients, as measured by pulse rate, blood pressure, and/or other symptoms. If such effects occur, AIRSUPRA may need to be discontinued. In addition, beta-agonists have been reported to produce electrocardiogram (ECG) changes, such as flattening of the T wave, prolongation of the QTc interval, and ST-segment depression. Therefore, AIRSUPRA, like all sympathomimetic amines, should be used with caution in patients with cardiovascular disorders, especially coronary insufficiency, cardiac arrhythmias, and hypertension
- **Do Not Exceed Recommended Dose:** Clinically significant cardiovascular effects and fatalities have been reported in association with excessive use of inhaled sympathomimetic drugs
- **Hypersensitivity Reactions, Including Anaphylaxis:** Can occur after administration of albuterol sulfate and budesonide, components of AIRSUPRA, as demonstrated by cases of anaphylaxis, angioedema, bronchospasm, oropharyngeal edema, rash, and urticaria. Discontinue AIRSUPRA if such reactions occur
- **Risk of Sympathomimetic Amines with Certain Coexisting Conditions:** AIRSUPRA, like all therapies containing sympathomimetic amines, should be used with caution in patients with convulsive disorders, hyperthyroidism, or diabetes mellitus and in patients who are unusually responsive to sympathomimetic amines
- **Hypokalemia:** Beta-adrenergic agonist medicines may produce significant hypokalemia in some patients. The decrease in serum potassium is usually transient, not requiring supplementation
- **Immunosuppression and Risk of Infections:** Due to possible immunosuppression from the use of inhaled corticosteroids (ICS), potential worsening of infections could occur. Use with caution. A more serious or fatal course of chickenpox or measles can occur in susceptible patients
- **Oropharyngeal Candidiasis:** Has occurred in patients treated with ICS agents. Monitor patients periodically. Advise patients to rinse his/her mouth with water, if available, without swallowing after inhalation
- **Hypercorticism and Adrenal Suppression:** May occur with very high doses in susceptible individuals. If such changes occur, consider appropriate therapy
- **Reduction in Bone Mineral Density:** Decreases in bone mineral density have been observed with long-term administration of ICS. For patients at high risk for decreased bone mineral density, assess initially and periodically thereafter
- **Glaucoma and Cataracts:** Have been reported following the long-term administration of ICS, including budesonide, a component of AIRSUPRA
- **Effects on Growth:** Orally inhaled corticosteroids, including budesonide, may cause a reduction in growth velocity when administered to pediatric patients. The safety and effectiveness of AIRSUPRA have not been established in pediatric patients, and AIRSUPRA is not indicated for use in this population
- **Most common adverse reactions** (incidence ≥ 1%) are headache, oral candidiasis, cough, and dysphonia
- **Drug Interactions:** AIRSUPRA should be administered with caution to patients being treated with:
  - Strong cytochrome P450 3A4 inhibitors (may cause systemic corticosteroid effects)
  - Short-acting bronchodilators (concomitant use of additional beta-agonists with AIRSUPRA should be used judiciously to prevent beta-agonist overdose)
  - Beta-blockers (may block pulmonary effects of beta-agonists and produce severe bronchospasm)
  - Diuretics or non-potassium-sparing diuretics (may potentiate hypokalemia or ECG changes). Consider monitoring potassium levels
  - Digoxin (may decrease serum digoxin levels). Consider monitoring digoxin levels
  - Monoamine oxidase inhibitors (MAOI) or tricyclic antidepressants (Use AIRSUPRA with extreme caution; may potentiate effect of albuterol on the cardiovascular system)
- Use AIRSUPRA with caution in patients with hepatic impairment, as budesonide systemic exposure may increase. Monitor patients with hepatic disease

## INDICATION

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