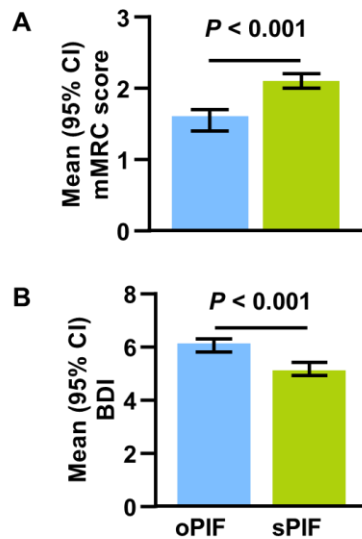


Graphical Abstract



In this analysis of data from two phase 3 clinical trials of participants with moderate to very severe chronic obstructive pulmonary disease (COPD), we demonstrated that suboptimal peak inspiratory flow (sPIF) is associated with significantly more dyspnea as measured by (A) modified Medical Research Council (mMRC) scoring and (B) the baseline dyspnea index (BDI). Compared with optimal PIF (oPIF), sPIF was associated with a higher clinical burden of COPD.