

Adherium presents first dataset generated from its growing RPM program, showing only 8.3% of asthma patients use inhalers correctly

Highlights:

- The first dataset generated and presented from Adherium's growing Remote Patient Monitoring (RPM) program - collected through the Hailie® Smartinhaler® platform - highlights most patients with asthma have sub-optimal inhaler usage technique, with only 8.3% using inhalers correctly.
- Inhaler technique observed across 265 patients was particularly poor for those using pressured metered dose inhalers (pMDIs), with only 3% demonstrating optimal technique.
- These findings highlight a significant unmet need in the identification of sub-optimal technique and identify an opportunity for targeted coaching, using objective data generated by the Hailie Smartinhalers.
- The data was presented at the [Eastern Allergy Conference](#) (EAC) in Palm Beach, Florida (28-31 May 2026).
- The dataset demonstrates how Adherium's commercial RPM footprint is directly translating into clinical insight, with the growing patient cohort within Adherium's RPM program producing meaningful, high-quality data.

Melbourne, Australia – 1 June 2026: [Adherium Limited](#) (ASX:ADR), a global leader in digital respiratory management and developer of the US FDA-cleared Hailie® Smartinhaler® platform is pleased to share the first dataset generated and presented from patients enrolled in the Company's Remote Patient Monitoring (RPM) program.

The objective data generated from Hailie® Smartinhalers® in patients with asthma found that only 8.3% demonstrated optimal inhaler technique, underscoring the limitations of routine clinic-based inhaler checks and the need for more effective patient coaching. **The data was presented at the Eastern Allergy Conference (EAC) on Saturday 30 May 2026.**

Sub-optimal inhaler technique has long been associated with poor symptom control and more frequent exacerbations in asthma. Although current **Global Initiative for Asthma** (GINA) guidelines recommend regular inhaler technique checks, these assessments are often subjective and may not reflect how patients use their medication in daily life outside the clinic setting.

Adherium's Hailie sensor technology, a jacket that attaches to most inhalers, was used to objectively evaluate key components of technique, including peak inspiratory flow rate, inhalation duration, inhalation volume, shake duration, and device orientation where applicable. Predefined criteria were used to determine whether inhaler use was optimal for pressurised metered dose inhalers (pMDIs) and Ellipta® devices.

The data, presented at the EAC, showed that among 265 patients recruited, 67% were female and the mean age was 41 years. Of the cohort, 166 patients (62.6%) were prescribed a pMDI preventer inhaler and 99 patients (37.4%) were prescribed an Ellipta device. Only 22 patients (8.3%) met the criteria for optimal inhaler technique based on Hailie SmartInhaler data. Of these, 5 patients (3.0%) used a pMDI and 17 patients (17.2%) used an Ellipta device correctly. This highlights a significant unmet need.

pMDIs are a very commonly prescribed type of inhaler for people with asthma, especially for younger children where dry powder inhalers are not licensed for use. A recent analysis of PBS inhaler reimbursements found that pMDIs account for 47.5% of all inhaler prescriptions in Australia¹. This includes both preventer medication and reliever (emergency) medication, such as Ventolin. Ensuring correct inhaler technique with preventer usage, reduces the need for reliever usage and can improve patient outcomes in asthma.

Adherium CEO, Dawn Bitz, said: *"These findings demonstrate the growing power of our Remote Patient Monitoring program, which is now generating objective, high-quality data at scale. We are delighted to have our own data presented at a conference for the first time. This first dataset shows how commercially deployed Hailie® SmartInhaler® technology can surface inhaler-technique issues - such as peak inspiratory flow rate and inhalation duration - that may be missed during routine care. By identifying these patterns, clinicians may be able to provide more targeted coaching to improve asthma management and patient outcomes."*

We are delighted to have Adherium's own RPM-derived data presented at a conference for the first time. This adds to the growing body of data demonstrating the clinical value of the Hailie® platform."

¹ Lam SWL, Navaratnam VV, Wurzel DF, Montgomery B, Blakey JD. Prescribing trends and environmental impact of prescribed inhaled medicines in Australia. *Chron Respir Dis*. 2026 Jan-Dec;23

Executive Director of Advocacy and Government Affairs, Past President, American College of Allergy, Asthma & Immunology, Dr Allen Meadows, commented: *"Emerging evidence suggests that smart inhaler technology could truly revolutionise the management of diseases like asthma and COPD. The findings suggest that objective sensor technology may help healthcare professionals better identify patients who need support with the fundamental components of inhaler technique, including inspiratory flow and inhalation timing."*

A copy of the poster is appended to this announcement.

Learn more at **adherium.com**

This ASX announcement was approved and authorised for release by the Board of Adherium.

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About Adherium (ASX: ADR):

Adherium is a provider of integrated digital health solutions and a worldwide leader in connected respiratory medical devices, with more than 180,000 sold globally. Adherium's Hailie[®] platform solution provides clinicians, healthcare providers and patients access to remotely monitor medication usage parameters and adherence, supporting reimbursement for qualifying patient management. The Hailie[®] solution includes a suite of integration tools to enable the capture and sharing of health data via mobile and desktop apps, Software Development Kit (SDK) and Application Programming Interface (API) integration tools, and Adherium's own broad range of sensors connected to respiratory medications. Adherium's Hailie[®] solution is designed to provide visibility to healthcare providers of medication use history to better understand patterns in patient respiratory disease. Learn more at **adherium.com**

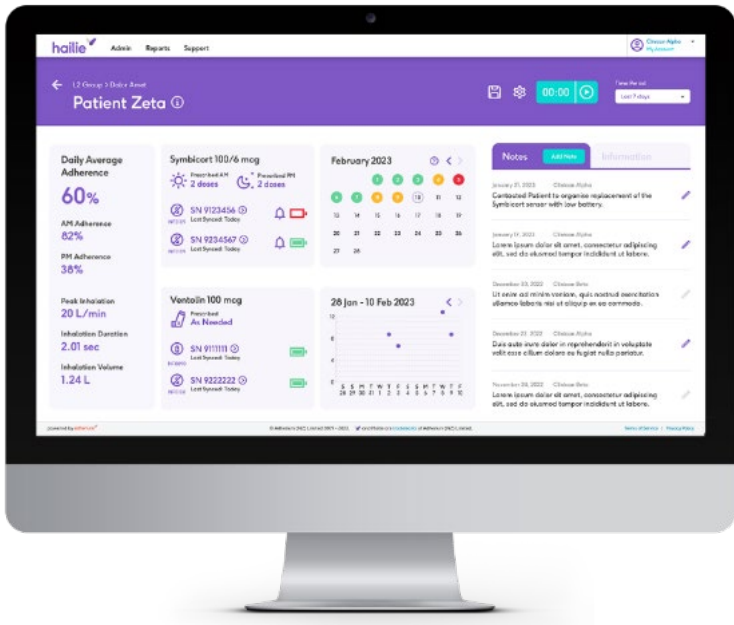
Objective data from the Hailie® Smartinhalers® illustrates the quality of inhaler technique for patients with asthma

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1. Adherium Ltd, 2. Executive Director of Advocacy and Government Affairs, 3. Professor of Pediatrics, Division of Allergy and Immunology, UAB.

Introduction

Sub-optimal inhaler technique has been associated with poor symptom control and frequent exacerbations in asthma. The GINA guidelines suggest regular inhaler technique checks are conducted but this is often a subjective assessment by healthcare professionals with no formal training. Additionally, it may not represent how the patient uses their medication every day, outside the clinic setting.

The Hailie® Smartinhaler® is a “jacket” that fits onto most inhalers and can detect key components of inhaler technique. These include the peak inspiratory flow rate (PIFR), inhalation duration, inhalation volume, shake duration and orientation where applicable. Using the Hailie Sensor, we describe an objective assessment of the number of patients with asthma with optimal inhaler technique.

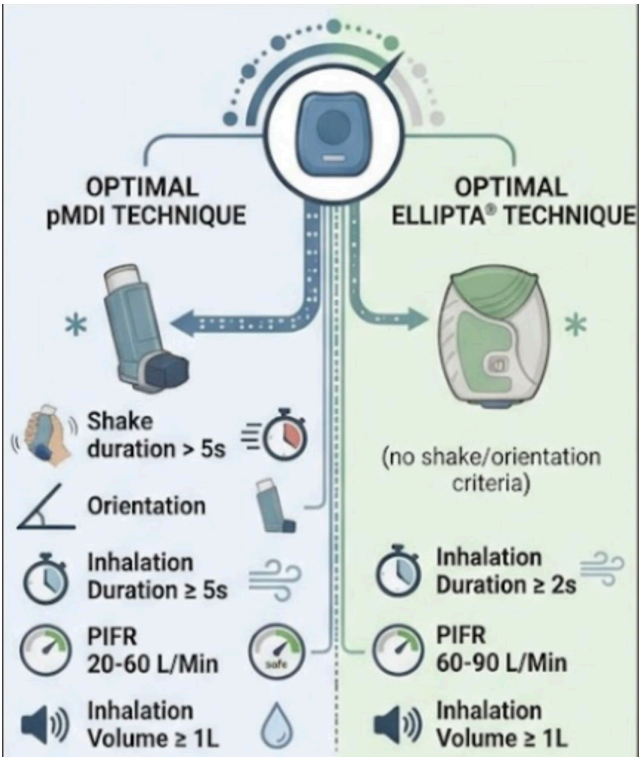


Methods

Patients with asthma using a compatible inhaler were issued with a Hailie Sensor. Baseline inhaler technique (the first inhalation recorded) was assessed for each patient. Patients may have received some inhaler technique coaching by a registered respiratory therapist (RRT) prior to the inhalation taking place.

Inhaler technique was considered optimal for a pMDI if the PIFR was between 20-60L/Min, inhalation duration was ≥5s, inhalation volume was ≥1L and shake duration was ≥5s.

For the Ellipta® devices, inhaler technique was considered optimal if the PIFR was between 60-90L/Min, inhalation duration was ≥2s, and the inhalation volume was ≥1L.



Results

A total of 265 patients were recruited (67% female). The mean age was 41 [range from 2 – 85 years]. 76/265 (28.7%) patients were aged ≤17 years; none of whom demonstrated optimal technique at baseline.

91.7%

of patients (243/265) demonstrated sub-optimal technique

OPTIMAL TECHNIQUE RATES BY DEVICE

Share of users with optimal technique (n / total)

Ellipta (DPI)

n = 99 patients (37% of cohort)

17.2%

17 of 99 with optimal technique

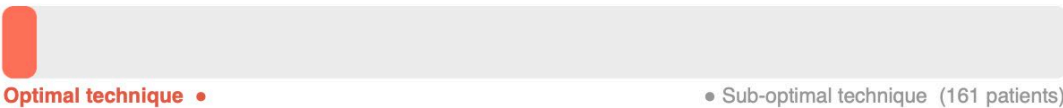


pMDI

n = 166 patients (63% of cohort)

3%

5 of 166 with optimal technique



Conclusion

The results show that when using objective data generated by the Hailie Sensors, inhaler technique was found to be sub-optimal for the majority of patients with asthma, especially those aged ≤17 years. This highlights a significant unmet need for patients with asthma. The data generated by the Hailie® Smartinhalers® can be used to target coaching of the fundamental components of inhaler technique, such as PIFR and inhalation duration which cannot be identified objectively otherwise. In turn, this has the potential to improve outcomes and reduce the steroid burden for patients with asthma.

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