Type 2 severe asthma: Why is additional control needed?



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Limitations of established treatments for severe type 2 asthma

Established treatment includes corticosteroid therapy¹

Severe asthma involves **corticosteroid insensitivity**, with persistent lack of control despite corticosteroid therapy¹ Patients with **severe asthma** experience **poor symptom control**, frequent **exacerbations** and **medication side effects**²

30% of patients require OCS in addition to high-dose ICS to maintain some asthma control¹

Although corticosteroids are the basis of treatment for milder forms of asthma, alternative molecular-targeted therapies may be required to modulate inflammation and improve corticosteroid insensitivity in severe asthma¹



Corticosteroid adverse effects in severe asthma

Real-world evidence from Optimum Patient Care Research Database



Cross-sectional observational study of patients with severe (required GINA Step 5 treatment and ≥4 OCS prescriptions/year in two consecutive study years) and mild or moderate (GINA Step 2-3) asthma. Results are based on data from the OPCRD, a UK respiratory database (N=7195, severe asthma [n=808] and mild-moderate asthma [n=3975])



Potential advantages of targeted therapy



FeNO, fractional exhaled nitric oxide; ICS, inhaled corticosteroid; IgE, immunoglobulin E, LABA, long-acting beta-agonist; LTRA, leukotriene receptor antagonist; SABA, short-acting beta-agonist. Katial R et al. J Alleray Clin Immunol Pract. 2017;5(2S):S1-S14.



Guidelines for management of severe type 2 asthma

- International ERS/ATS guidelines provide recommendations for clinical practice for evaluation and treatment of severe asthma¹
- The GINA 2019 Pocket Guide for Health Professionals provides a practical summary for clinical practice²

Recommendations include:

- Importance of timely assessment of severe asthma phenotypes; and
- Consideration of targeted biologic treatment for patients with type 2 airway inflammation

GINA 2019 Pocket Guide: Overall steps for management of severe asthma

1. Investigate and manage adult and adolescent patients with difficult-to-treat asthma

2. Assess and treat severe asthma phenotypes •Assess severe phenotype

 Assess severe phenotype
 Consider non-biologic treatments
 Consider add-on biologic targeted treatments for patients with type-2 airway inflammation



3. Monitor/manage severe asthma treatment

ERS/ATS, European Respiratory Society and American Thoracic Society; GINA, Global Initiative for Asthma. 1. Chung KF et al. *Eur Respir J.* 2014;43:343–373. 2. Global Initiative for Asthma, 2019. Available at <u>www.ginasthma.org</u> (Accessed March 2020).

